# OHEMST& ORUGUST

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SEE PAGE 11 FOR DETAILS.

22 August 1998

Dobson seeks views on the way ahead

PCC chairman suffers in Omagh bomb blast

Traditional pharmacies preferred in CHC survey

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nother torrent of paper on primary care groups flowed out of the NHS Executive last week in the shape of HSC 1998/139 along with its supporting guidance (C&D last week, p7). The circular has already drawn cries of 'betrayal' from GPs as the consequences of a tough budgetary regime are finally beginning to register. Having won the political battle for majority representation on PCG boards, it is a bit late for the BMA to start worrying that GPs will refuse to participate. HSC 1998/139 spells out clearly that co-option may be considered "for dealing with specific elements of a PCG's tasks". Supporting guidance notes emphasise that PCGs "must seek to actively involve and engage all stakeholders in shaping the decisions and policies of the group". The expertise which community pharmacists have is identified, along with the important caveat that LPCs should be consulted regarding the adoption of local formularies since this will have a direct commercial impact on pharmacy businesses. However, it remains disappointing that pharmacists do not have a place on the board. This point should be made forcibly to Mr Dobson, since he is asking for views on the role of community pharmacists in the primary care team of the future.

This latest devolution of resource management is going to demand a steep learning curve from PCG boards, which is one reason why the latest health quite specific setting is in responsibilities. Quite how the NHSE reconciles statements like "There will be no question of anyone being denied the drugs they need because a GP has run out of cash" with "PCGs will be expected to live within their budgets" has yet to be revealed. The first real test of a PCG's mettle will the requirement to develop a costed primary care investment plan (PCIP) for 1999/2000 that includes "broader primary care developments". PCGs will be run as shadow organisations until April 1999, but just how seriously they will involve the broad church of health orofessionals will become evident much sooner.

# CHEMIST& DRUGGIST

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# CHEMST& DRUGGIST

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5

5

26

27

Dobson invites pharmacists' comments before round table talks 4

"The need for a new and extended role has never been greater"



Omagh pharmacy provides first aid after bomb 4

PCC chairman Patrick Slevin talks of the carnage

Patients prefer 'traditional' pharmacies

Chichester CHC survey of 600 patients gives thumbs down to supermarket pharmacy format

HSC 1998/139 gives details on how PCGs should operate

Costed primary care plans to be in place for 1999/2000

Good advice on getting the best out of regular exercise

Vitamins and supplements – where is market growth coming from?

Neurolinguistics: a new way of helping improve communication 22

Terry Maguire says this new technique can benefit pharmacists

The prescription spectacles opportunity

Raj Zavery writes from personal experience

SetonScholl moves on from a model merger 24

Talk of international ambitions



Access 24 – providing telephone advice around the clock

How new technology is put to use in giving health care advice

AAH restructure proves profitable

Significant increase in sales in the first half of the year

New work time regulations on sale 28

European working time directive regulations now available

# REGULARS

Industry Viewpoint	7	Business News	27
<b>Topical Reflections</b>	7	Coming Events	28
<b>Prescription Specialities</b>	8	Classified Advertisements	29
Counterpoints	10	Business Link	30
Chemex Column	21	About People	34

# Dobson writes to pharmacies seeking views on way ahead

Health secretary Frank Dobson has written to all community pharmacies in England inviting comments about his proposed strategy for pharmacy.

In a letter sent out on Tuesday, Mr Dobson says he would like to hear views from people working in community pharmacy or those with an interest in it. He is also writing to NHS, patient and other organisations.

At the end of June, he announced he would be publishing a strategy document on community pharmacy in the autumn, as well as holding round table talks with leaders of the pharmacy, medical and nursing not making enough use of the extensive training and professional skills of community pharmacists in both medicines and more general health matters,' says Mr Dobson in his letter. "The need for a new and extended role for them has never been greater."

He is asking for views on what is good about the current system as well as "what is less good and needs change". Views on how community pharmacy and community pharmacists can play a greater role in the NHS and how this can be done "in a safe and affordable way that puts patients first", are also being sought.

Royal Pharmaceutical Society

president Hemant Patel says the letter provides an opportunity to explain to Mr Dobson how quality services are being provided pharmacists to improve patient care and ensure the most cost effective use of medicines.

"This is a time to be enthusiastic. All the pharmacy professional bodies are encouraging people to respond. I would be grateful if any pharmacist doing so could send a copy of their letter to me at the Society," he says.

Responses should be made in writing by September 30 to the Community Pharmacy Team, NHS Executive, Room 168, Richmond House, 79 Whitehall, London SW1A 2NS.

assessed as to whether the medication is still appropriate. pharmacists Community should be encouraged to undertake monthly medication reviews for every resident, bringing any

**RCP** report supports

All residents of care homes should have access to expert advice from a pharmacist if they are on psychoactive or multiple

medication, according to a report

published by the Royal College of

More incentives are needed for

pharmacists to review medica-

tion and act in a training role, says the report 'Enhancing the

health of older people in long-

It says the goal should be to use

appropriate medicines in mini-

mum doses, simplifying regimes

where possible. Regular medica-

tion review is the cornerstone of

long-term prescribing and all res-

idents taking psychoactive drugs

or polypharmacy should be

pharmacist advice

to care homes

Physicians.

term care'.

anomalies to the GP's attention. Any recommendations must be specific, based on fact, referenced where possible and accompanied by suggestions for alternatives.

The aim should be to reduce medication, improve the patient's quality of life and improve communication between residents,

# PCC chairman's pharmacy blasted in in Omagh bombing

An Omagh pharmacy, less than 40m from where the bomb went off last Saturday, was able to provide help for the wounded.

Catherine Slevin, who owns and lives by the Tyrone Pharmacy in Market Street, her staff and customers escaped relatively unscathed by the incident. Mrs Slevin and her housekeeper, who has first aid training, then went out to offer help. At one point, a child whose foot had been blown off was brought into the shop, where a tourniquet was applied.

Mrs Slevin's son Patrick, who is chairman of the Pharmaceutical Contractors' Committee, was not working at the shop at the time of the bomb, but quickly made his way there.

He told Chemist & Druggist on Tuesday of the horror the bomb has inflicted on a community in which he grew up, where relations between the different groups were considered good. "It has never been a town full of bigotry or hatred ... one can only hope that this is not divisive.'

He returned to the pharmacy on Tuesday to board it up, but also spent the morning visiting families of victims. "I have been round to four houses in which there were four people killed. Everyone shares a common grief," he said.

The pharmacy has been in



The aftermath of last Saturday's bombing in Omagh, co Tyrone. The Slevins' pharmacy was less than 40m from the bomb blast

bombings before. The last significant damage occurred in 1985. Mr Slevin said three hours after a bombing you usually wanted to go in and clean up and get back to normal. "You do not feel the same urgency this time. The town feels numb. There is nothing happening, there's a sense of not wanting to go on.'

He said the horror was still unfolding as people were allowed to bring the dead back to their homes before burial.

Mr Slevin admired the ingenuity of the many people who were on the scene before the emergency services arrived and "who performed very heroically". People were using shelving and doors as stretchers, and a bus was commandeered to take away the walking wounded.

The scene outside the pharmacy was described as "total carnage". Mr Slevin said they were stepping over limbs in the street.

"One cannot understand what cause it serves by murdering women and children," he said. "We talk about things being the will of God. One questions the strangeness of the will of God, but one would hope there is a grace of God for us to accept what perhaps we do not understand and so that we do not become embittered."

# carers and prescribers. Hints on detecting

forged scripts

Liverpool LPC secretary Jeremy Clitherow has sent local contractors some hints on detecting forged prescriptions.

He is circulating a 'Schedule of doubt' – a list of questions pharmacists should ask themselves when dispensing a suspect prescription. They are:

- Is the patient a stranger?
- Is the prescriber a stranger?
- Is the substance liable to abuse?
- Is it/are they high cost item(s)?
- Why bring the prescription in
- Why has the person brought the prescription here when it was prescribed from a distant surgery?
- Is the patient shifty/nervous/too cocksure/in a desperate rush?
- Subsequent attitude did they "have to wait"? What happened when you asked them to call back? Attitude on inquiry – What hap-
- pened when you asked about the name of the patient/the declaration/ the address of the declaree?

The answers will help pharmacists assess the likelihood of the prescription being forged, says Mr Clitherow.



# Window displays help health promotion

Window displays and extra training for pharmacists on health promotion techniques have seen enquiries about pregnancy double in West Sussex pharmacies.

In addition, requests for nutritional information rose 25 per cent while occasions when pharmacists offered advice on nutrition increased four-fold.

The figures come from a study carried out in the Chichester and Crawley areas earlier this year. The scheme aimed to enhance the health promotion skills of pharmacists in West Sussex, as well as giving them information on certain health areas which they could pass on to customers.

Based on the work in Ealing, Hammersmith & Hounslow Health Authority (*C&D* January 4, 1997, p4), the study included monitoring the number of requests for information from customers before and during the period of the window display. Evaluation of the training sessions was also carried out.

Pharmacists received general training on promoting health as well as specialist training on nutrition and pregnancy. Each received \$400 as a payment for window space, record keeping and taking part, and \$250 for training days. The total funding of \$12,680 came from Primary Care Development Funds.

# Pharmacies preferred to supermarkets

A survey has found overwhelmng preference for using a 'tradiional' pharmacy compared to he supermarket to obtain prescriptions.

A Chichester Community Health Council survey carried out in May has found that only 18 out of the 616 respondents, or 2.9 per cent, prefer the supermarket. Almost seven out of 10 (69.3 per cent) favoured the traditional pharmacy, with the remainder opting for the GP surgery.

The 'Survey of preferences for primary care' was conducted in May in hair salons in the city. Target subjects for the survey on riews about pharmacy, GP and lental services, were those visiting 15 of the city's hair salons male, female, unisex, traditional, modern) which were elected to give a representative ample of the population.

Salon customers were egarded as having the time and opportunity to co-operate with he survey while waiting and the alon owners distributed and colected the response forms.

Of the respondents, over a hird (36.9 per cent) used a pharuacy more than monthly, but ss than fortnightly, while a fifth used a pharmacy every one or two weeks. However, just over a third replied they never consulted a pharmacist for medical advice and a similar number had not done so for over a year.

"The tendency not to use pharmacists for medical advice may reflect lack of public awareness of the role of pharmacists," says the report.

Although the respondents show a heavy bias towards females (16:1), the CHC believes that the results "give a useful indicator of public opinion which should be taken into account when decisions regarding planning and development of services are taken".

CHC chief officer Richard Mason said the survey was conducted mainly to obtain views of the general public in areas of concern where they might concentrate in the future. "One of the areas is the underutilisation of community pharmacy. It should be part of the whole aspect of primary care in a way it has not been used in the past," he said.

One of the areas the CHC hopes to work on is to help inform the public of the services that are available at their community pharmacy and make people aware that it is an alternative service to the GP

Mr Mason said that as the CHC was a statutory consultee for pharmacy contract applications, the results would be of use when considering applications from supermarkets.

The CHC has taken an active interest in pharmacy and Mr Mason says relations with the Local Pharmaceutical Committee are "excellent". The CHC was one of the first to visit every pharmacy in the area.

Commenting on the apparent support for the ability to have prescriptions dispensed at a GP surgery, Mr Mason said the public quite favoured doctor dispensing for the convenience, "so we need to make sure the public are making an informed decision, and that they understand the difference between the doctor and the pharmacist dispensing, and the added value pharmacists can bring".

Besides finding out about the public's preferences for primary health care services, the CHC is pleased that the nature of the survey has also raised its own profile in the local press.

# Avon seeks more pharmacists as antismoking specialists

Avon's smoking cessation project is being extended to provide each primary care group area with at least one pharmacy offering specialist advice.

The local pharmaceutical committee and health authority are seeking 14 more pharmacies as active centres. They will be integrated with Health Promotion Services, Avon's referral system from GPs, and Quitline (the telephone helpline) and will offer specialist counselling services.

All pharmacists will be trained using the Pharmacist Action on Smoking packs and half will receive additional training on behavioural aspects of change. Participants will receive \$100 after a year, providing proper records and follow-up are maintained for at least four patients.

LPC secretary Alaster Rutherford said: "I hope that this work will demonstrate to PCGs that NHS community pharmacy has a central role to play in implementing Health Improvement Plans. They should be more sensitive to the real local health gain offered by this type of pharmacy service." PCGs were a way to secure finance for new services, he added.

Replying to suggestions that the project might divide pharmacies, he said: "To sustain our case with PCGs we have to be able to guarantee quality in service delivery. It simply is not good enough to say 'go to your local pharmacy' when standards, as we all know, are variable. What we are looking at here is the first stage of development with minimal resources."

GPs would be reminded that all pharmacies sold smoking cessation aids, he said. The centres would offer counselling rather than product advice.

# PSNC presses on pay

The Pharmaceutical Services Negotiating Committee is still waiting for a further pay offer from the Department of Health. The Committee has written to the DoH, pressing for a revised offer to be sent before September.

# Drug trafficking exemption

The law has been changed to allow the manufacture of chemical precursors so they can be supplied by police pursuing cases involving illicit manufacture of controlled drugs. The Act comes into force on September 9. 'Criminal Justice (International Co-operation) (Amendment) Act 1998'. The Stationery Office £0.65.

## Premises down

The number of pharmacy premises fell again in July to 12,225, down by four from June. The month saw 21 pharmacies commencing trading, 28 deletions and three restorations. Superdrug registered 32 pharmacies.

## BANs and rINNs

It is unlikely any legal changes on adoption of recommended International Non-proprietary Names will be implemented before mid-1999, says the Medicines Control Agency. This is due to the volume of correspondence received on consultation letter MLX 241.

# **Chiropractice Council**

The General Chiropractic Council has been formally established with the first commencement order made under the Chiropractors Act 1994.

# M stats for April...

There were 1,805,663 items dispensed from 1,033,825 prescription forms in Northern Ireland in April. The ingredient cost was £17.87 million (£16.72m net). Discount was £1.151m, with oncost and other payments totalling £2.826m. Gross cost was £19.55m (£18.99m net). Gross cost per prescription was £10.826 with ingredient cost £9.8985. Net ingredient cost per prescription was £9.2612.

# ... and for May

There were 1,753,821 items dispensed from 1,050,179 prescription forms in Northern Ireland in May. Ingredient cost was £17.51 million (£16.38m net). Discount was £1.124m, with oncost and other payments totalling £2.757m. Gross cost was £19.14m (£18.60m net). Gross cost per prescription was £10.9141 with ingredient cost £9.9827. Net ingredient cost per prescription was £9.3420.

# NHSE spells it out for PCGs

No patient will be denied the drugs they need because a GP or primary care group has run out of cash, says a Health Service circular issued last week.

GPs will still decide what is best for the patient, whether it is prescribing drugs or referral to hospital for further investigations or treatment.

The circular (HSC 1998/139) sets out the next steps in the development of PCGs, explaining how they will be funded and managed. It reaffirms that pharmacists may be co-opted as associate board members, without the right to vote.

Successful PCGs are likely to be those which draw on all the expertise of their stakeholders to develop local policies, the circular says. "It will be the ability to build and sustain effective multidisciplinary working and partnership that becomes the most important success criterion."

Pharmacists could play a substantive role in devising local prescribing guidelines.

Those who take on key responsibilities in developing, governing or managing PCGs will have their time "appropriately remunerated in line with a national framework", to be published in the autumn.

There will be local flexibility in how PCGs choose to develop their structures but they will be expected to live within their budgets and operate cost-effectively.

From 1999-2000 about \$3 per head will be included in health authority allocations to help support PCGs, with resources varying according to the level of devolved responsibility they take on. The money will include funds to cover management costs and, for the first two years, the costs of winding up GP fundholding.

Health authorities may start 1999-2000 with accumulated deficits or surpluses, and decisions on the handling of these balances will be announced in the autumn. A guaranteed mini-

mum level of general medical services infrastructure expenditure (or 'floor') will be set at health authority level, equivalent to each authority's current baseline allocation for GMS cash-limited expenditure, uplifted for inflation, so investment in primary care infrastructure can be maintained.

PCGs will be required to develop a costed primary care investment plan for 1999-2000, covering GMS infrastructure developments (investment in staff, computers and premises) and broader primary care developments. The final proposals will be subject to agreement with the health authority which will consider them in the context of the wider Health Improvement Programme and the total 'floor' for GMS infrastructure spending.

Individual practices' proposals for new investment in staff, premises and computers will be submitted to PCGs and considered in the investment plan.

# MDA targets Ecstasy analogues

A total of 36 compounds related to Ecstasy (3,4-methylenedioxymethamphetamine or MDMA) are to be specifically brought under the control of the Misuse of Drugs Act 1971.

In Home Office proposals issued last week, the compounds will mainly be added to Part I of Schedule 2 of the Act as Class A drugs.

As they have no acknowledged therapeutic uses, they will also become listed in Schedule 1 of the Misuse of Drugs Regulations 1985.

One compound, alphamethylphenethylhydroxylamine or N-hydroxylamphetamine, is to be added to the list of controlled drugs in Part II of Sch 2 of the Misuse of Drugs Act as a Class B

drug, as well as Sch 2 of the Misuse of Drugs Regulations.

The compounds are named specifically as it would not be possible to bring them within the terms of a generic definition without including substances with actual or possible therapeutic usefulness, says the Home Office letter.

The letter also proposes that the 1985 Regulations be consolidated to take account of the eight amendments that have been made since 1985, bringing them all together in one document.

Comments about the proposals should be sent to Sue Mitchell or Jonathan Duke-Evans at the Action Against Drugs Unit, Room 243, Home Office, 50 Queen Anne's Gate, London SWIII 9AT.

# Patients to be asked their views on NHS

Up to 150,000 NHS patients and users in England are to be asked for their views on the service.

As well as an annual core survey of patients' experience of primary care services, particularly in general practice, there will be a rolling programme looking in depth at selected areas of the NHS. The first will be coronary heart disease and cancer services

Among the subjects to be assessed will be ease of access to services, waiting time, quality of information about treatment, efficiency, privacy and dignity of care, and courtesy and helpfulness of staff. Respondents will be those "who have used the NHS recently".

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### **INDUSTRY VIEWPOINT**



# Giving the thumbs up to retail initiatives

With the election of Hemant Patel as president of the Royal Pharmaceutical Society, Gaz Clapinski as chairman of the NPA, and with Wally Dove heading up the PSNC, the pharmacy profession has three strong, persuasive leaders for the challenging year ahead.

It was interesting to read (*C&D*) August 8, p18) that one of Mr Clapinski's priorities will be to promote unity within the profession. Few who would disagree with putting that in a manifesto.

Away from pharmacy politics, there is one key area where pharmacists are pulling together to increase their purchasing, retailing and marketing skills. Without a great deal of publicity, Numark, Unichem and AAH are progressively and successfully building a strong membership for each of their retailing organisations.

Numark, with over 1,200 mem-

# These marketing initiatives break new ground in pharmacy sales

bers, is the largest. Unichem's Community Pharmacy initiative has 660 members, and AAH's new Vantage programme is being tested in 80 pharmacies, with plans to increase membership to 1,000 within a year.

From a manufacturer's perspective, these developments are encouraging. The potential of the wholesalers to make their marketing and promotional programmes work is significantly enhanced when they can negotiate with suppliers and guarantee support and compliance from their retail members.

Independent community pharmacists benefit from the promotional discounts negotiated and the increasingly sophisticated support being offered by their chosen wholesaler. All three are exploring the potential to market directly to the consumer.

These marketing initiatives break new ground by helping pharmacies increase their retail sales. They deserve the support of all manufacturers prepared to invest in the pharmacy sector.

Written by a senior industry manager



# Drug price hikes – there is a case to answer

Two weeks ago (Xrayser August 8) I suggested that the spirit, if not the legality, of the Pharmaceutical Price Regulation Scheme is being broken by large hikes in the prices of slow-moving drugs when they change ownership from large to small companies.

So far the industry has been conspicuous by the silence of its reply, but now the national press has picked up the story (but you read it first in *C&D*!) with front page headlines in *The Guardian* on August 11 and follow-up articles later in the week.

A spokesman for Novartis, the company that has recently sold a number of slow-moving products including Slow Sodium, Slow-K and Syntometrine, is reported by The Guardian as saying that these drugs were underpriced relative to their true manufacturing costs, but now that they have been sold they have reverted to their true market value.

This argument may have some validity, but the PPRS was designed as a workable trade-off between the need of the industry to invest in research and development and the requirement of the

# Topical Reflections

NHS to predictably contain its drug expenditure.

Within the scheme, Novartis and other similarly criticised companies have the freedom to adjust prices according to their own internal priorities, as long as the overall agreed profits are not exceeded. This works well until the distortions of internal pricing are exacerbated by disposals of the type now being criticised.

Not only does Novartis enjoy a one-off capital injection, but it also retains the manufacturing contract for the supply of drugs whose profits now conveniently fall outside the scheme. Meanwhile the smaller company, who has neither research or development costs to recoup, can raise prices with apparent impunity.

Public accusations of exploitation, manipulation and nepotism in the pages of national newspapers cannot make for contented boardroom reading, but the industry does have a case to answer. The overall increased price the NHS is being asked to pay must be fuelling similar overall profits for the industry.

Those profits must be returned quickly to the NHS, and, in the soon-to-be-renegotiated PPRS, a watertight agreement made whereby the internal machinations of the pharmaceutical industry are not unfairly funded by the taxpayer.

Time to put the brake on syringe sales

The supply of clean 'works' to drug abusers was originally introduced in order to limit

the spread of diseases such as AIDS and hepatitis B. Many years later, sales are made under national guidelines drawn up by the Royal Pharmaceutical Society, but needle and syringe schemes are still organised by health authorities, with the funding allocated often unable to cope with demand.

In Avon this lack of funding has meant that a rationing system has had to be introduced for the exchange scheme. But in introducing this system, the problem of pushers offering clean syringes as part of the 'opening package' to new clients has been highlighted (*C&D* August 15, p4).

Then there is the problem of diabetics, where the potential leakage of syringes onto the black market is always a possibility. The easy availability of clean works may prevent disease but, paradoxically, may also encourage the spread of drug dependency.

The return of used syringes is also uncontrolled. Despite the RPSGB's recent tightening of the Code of Ethics, I receive back less than 10 per cent of the syringes I sell.

The sources of supply to, and the monitoring of returns from, the dependency market is uncontrolled and fragmented to the point at which the present system could be doing more harm than good.

Perhaps the time has now come for the sale of syringes to be stopped.

Diabetics should be actively changed to the 'safer' pen delivery systems. Furthermore, and a nationally-controlled and centrally-funded needle and syringe scheme should be introduced which ensures that sterile works are freely available, but only when their equivalent numbers are returned to the

pharmacy which supplied

them for exchange.

# **MEDICAL**matters

# Hard water linked to eczema

Atopic eczema in children may have its roots in everyday exposure to hard water, according to a study in *The Lancet*.

Environmental factors are known to be involved in the aetiology of atopic eczema, and hard water, specifically chlorine, has been cited as one such exacerbant. The ecological study aimed to establish a link between domestic water hardness and the incidence of eczema in children.

A questionnaire on lifetime prevalence of eczema and eczema over a one year period was sent to the parents of 4,141 randomly selected primary school children and 3,499 secondary school children in southern Nottinghamshire to fill in on their behalf.

Data on regional water hardness was then matched with eczema prevalence. Adjustments were made for factors relating to sex, age, socio-economic status and access to health care.

A significant direct relation between eczema and water hardness was seen in primary school children. The one-year period prevalence was 17.3 per cent in the highest water hardness area and 12 per cent in the lowest, and 25.4 per cent and 21.2 per cent for lifetime prevalence.

No significant relationship between water hardness and eczema was seen in secondary school children, suggesting that the link may be age-related. One explanation may be that older children wash less frequently and are less exposed to hard water; another is that adolescents' skin may be less sensitive.

Although ezzema prevalence in primary school children increased as chlorine content of the hard water increased, this was not significant when adjusted for confounding factors.

Chlorine was thought to act as an irritant to existing atopic eczema. Calcium and magnesium act as direct irritants but may act indirectly by making soap and shampoo more irritant.

These results are thought to be representative of the whole UK population as the range of water hardness levels in the area was typical for the whole country. Further research is needed to more accurately assess the link.

# Smokers suffer in smoking bans

A new survey has shown that nearly a quarter of smokers are put off airline flights that operate a 'no smoking' policy.

A Gallup survey, commissioned by Pharmacia & Upjohn, found that 22 per cent of the 636 smokers surveyed said that they would be stressed, irritable, nervous or would need a distraction if they were flying with a smoking ban in place. One in four smokers said their enjoyment of a flight would be spoilt where smoking was banned

There were also significant differences between the sexes with nearly twice as many women as men being guarded about flying without a cigarette.

Dr Jonathan Foulds, a clinical psychologist at the University of Surrey said: "Smokers who feel that they are likely to be uncomfortable in a non-smoking environment should plan in advance to counteract the effects of nicotine withdrawal by using nicotine replacement therapy ... this will reduce their irritability and allow them to more easily enjoy the flight."

An increasing number of airlines now ban smoking on flights: 62 per cent of the world's major international airlines surveyed now operate a non-smoking longhaul service and 76 per cent have a blanket non-smoking policy for shorter internal flights.

# How much should cholesterol be lowered in CHD?

Cholesterol levels should be lowered to set targets rather than relative values for each patient.

Professor Rosengren, of Sahlgrenska University Hospital in Göteborg, Sweden, in the *British Medical Journal* that settling for proportional lowering of serum cholesterol instead of trying to achieve target levels is adequate for most patients but is not enough for a significant number who get sub-optimal treatment.

A more intensive reduction in risk of coronary events in a high

risk population could lead to "a not unimportant number of lives saved", he says. However, whether the additional numbers which would need to be treated are justified by the number saved is not clear, nor is whether prolonged intensive cholesterol lowering by medication will lead to excess non-coronary mortality.

Several large trials have already shown that lowering cholesterol in patients with coronary heart disease and normal to high cholesterol levels can reduce coronary events by 20-40 per cent. The question left is to what extent should cholesterol be lowered.

Current guidelines recommend reducing low density lipoprotein to 2.6mmol/l. The downfall of statins, however, is that they reduce cholesterol by a proportion of the pre-treatment value rather than to a specific target. Patients with high cholesterol will find it harder to achieve lower set targets, even though their absolute reductions are higher.

#### SCRIPT SPECIALS

# **Ensure Plus reformulated**

Ensure Plus in tetrapaks has undergone the following formulation changes:

proteins now include milk protein isolates;

 the fat blend has had canola oil and corn oil added to it;

 the carbohydrate content has slightly increased while the sucrose level has decreased;

 beta-carotene has been added to the vitamin and mineral blend.
 New Ensure Plus, complete with pack redesign, is being phased in over the next six weeks as soon as current stock is exhausted.
 Abbott Laboratories Ltd.
 Tel: 01795 580303.

# Lipostat now for stroke

Lipostat (pravastatin) has had its licence extended to include the prevention of stroke in post-

myocardial infarction patients. Pravastatin is the only statin indicated for the reduction of risk of both cardiovascular disease and stroke. The new indication follows the results of two landmark trials. The CARE trial showed that pravastatin reduced the risk of stroke in post-MI patients with average cholesterol levels by 31 per cent. In the LIPID study, it reduced the risk of stroke in patients with post-MI and unstable angina with slightly above average cholesterol levels by 19 per cent. **Bristol-Myers Squibb Pharma**ceuticals Ltd. 0181 572 7422.

# **Exorex reminder**

Pharmax Healthcare has issued a statement clarifying the legal status of its Exorex products for psoriasis. The range consists of lotion, cream, a leave-on conditioner, shampoo, bath/shower gel and soap. Only the lotion carries a GSL licence and is prescribable on an FP10. Pharmax Ltd. Tel: 01322 550550.

# Insulin shortage

Hypurin Porcine 30/70 mix and Hypurin Porcine Isophane cartidges are temporarily out of stock. However, vial preparations of the insulins continue to be available and should be used in place of cartridges where possible.

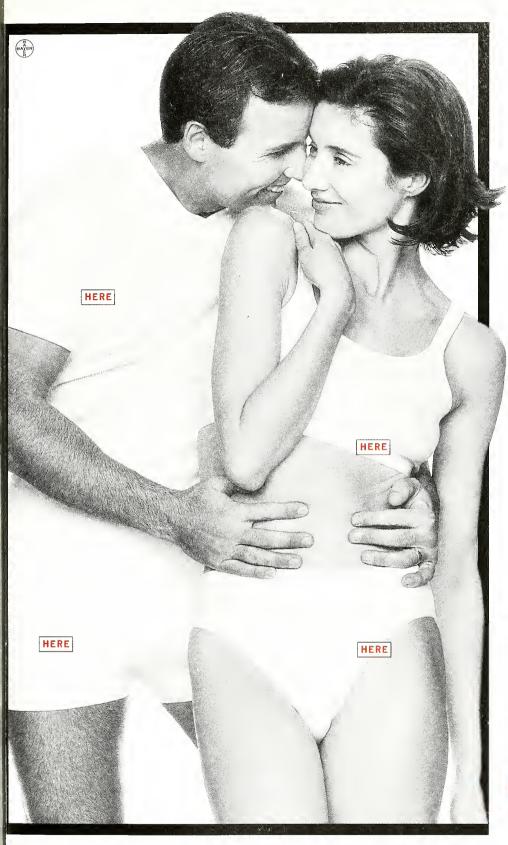
CP Pharmaceuticals Ltd.
Tel: 01978 661261.

# Powerbreathe source

Pharmacists trying to get hold of Powerbreathe for customers should contact makers IMT Technologies for more information. Powerbreathe, a non-drug device developed to help combat breathlessness by exercising and strengthening inspiratory muscles, has been featured on BBC's 'Tomorrow's World'. IMT is based at the Sports Medicine and Human Performance Unit, University of Birmingham. Powerbreathe is available via mail order priced £45 (inc pp and VAT). IMT Technologies Ltd. Tel: 0121 414 7676.

# MS web site relaunched

Serono, maker of the interferon Rebif, has relaunched its multiple sclerosis web site to provide patients and carers with a comprehensive source of fact and data on the disease and its treatment. The web site is at http://www.ms-network.com.
Serono Laboratories (UK) Ltd. Tel: 01707 331972.



It's easy to make the most of sweat rash sales with Canesten Hydrocortisone, especially at this time of year.

Canesten Hydrocortisone is designed to get rid of candidal sweat rash – fast. Its unique OTC combination of 1% hydrocortisone and clotrimazole quickly and safely reduces the inflamed skin, soothes the itch and treats the underlying fungal cause.

As a critical component of our growing antifungal education programme, Canesten Hydrocortisone also features heavily in the latest BEST training module.

Designed to help you identify different dermatological skin infections and treat them effectively, it's another reason why now is your BEST opportunity to profit from the sweat rash market.

Ring Ceuta Healthcare Customer Services on 01202 314 824 for your BEST programme, today.

Canesten Hydrocortisone
Clotrimazole 1% & Hydrocortisone 1%

Gets rid of candidal sweat rash

# Get the BEST out of sweat rash.

irridged Product Information for Canesten Hydrocortisone. Presentation: Canesten Hydrocortisone cream containing 1% clotrimazole and 1% hydrocortisone. Uses: Athlete's foot and candidal intertrigo where existing symptoms of inflammation require rapid relief. Dosage and Administration: Apply thinly and evenly to affected area twice daily and rub in gently Contra-indications: Use on face, eyes, mouth or mucous imbranes; broken or large areas of skin, cold sores or anne; for treatment penods longer than seven days, hypersensitivity to ingredients. Do not use in the following unless prescribed by doctor children under 10 years, grancy and lactation; on ano-genital area; to treat ingworm or secondarily infected skin conditions. Warnings: Long-term continuous therapy to extensive areas of skin should be avoided. Avoid covering treated area with at dressing. Side-effects: Local mild burning or irritation. Very rarely, patient may find irritation intolerable and stop treatment. Hypersensitivity reactions. Legal Category. P Package Quantity and Cost Price: 15g tube, £4.49 sduct Licence Number: PL 0010/0216 Further Information Available From: Bayer plc, Consumer Care Division, Bayer House, Strawberry Hill, Newburny, Berkshire, RG14.1JA. Date of Preparation: March 1997

# COUNTERpoints

# Cow & Gate to increase weaning market

Cow & Gate expects to increase the volume and value of the baby food market with its launch this month of a jar range of wet foods.

The new range consists of 14 recipes suitable for babies from four months to toddlers of 12 months and over. Recipes such as Sunday Lunch, Vegetable & Turkey Casserole, Fruit Muesli and Chocolate Pudding are available in three sizes – 140g, 185g and 235g – aimed at children aged four, seven and 12 months. They retail at £0.46, \$0.53 and \$0.71

respectively.

Research by the company identified a gap in its portfolio, and the new range is intended to keep

mothers loyal to the Cow & Gate brand by offering them suitable products at each feeding stage. The range is being As mothers express a preference for food in jars rather than tinned foods, Cow & Gate expects many tin users



positioned to complement rather than compete with Olvarit, its premium jar range – giving everyday value with Cow & Gate and Olvarit for a 'treat'. to upgrade to the slightly more expensive jars, thus pushing up the value at the lower end of the feeding market.

The ultimate aim is to retain more users to the

12-month stage. Currently penetration drops from 80 per cent when the baby is 0-4 months to 15 per cent

when the baby is a year old. Cow & Gate hope to increase the weaning market despite the falling birth rate. European rates of penetration and prices of foods are significantly higher than in the UK.

Cow & Gate is also looking to extend into first finger foods with the launch of Pure Baby Rice Cakes (50g, £0.89). The cakes have no sugar or added salt which makes them

a healthy alternative to rusks and biscuits. Some \$12 million is spent annually on adult snacks for the under twos. Cow & Gate. Tel: 01225 768381.

# Herbal remedy advice service

GR Lane Health Products is launching an advice service focusing on herbal remedies for pharmacists and their customers.

The service is being introduced in response to the growing consumer drive for self-diagnosis and treatment.

Individual answers, tips and detailed health advice are available free of charge. Questions should be sent to: Janet Lane, GR Lane Health Products, FREEPOST, Gloucester, Gl1 3QB. GR Lane Health Products. Tel: 01452 524012.

# **Bayer BEST**

The third module of the Bayer Educational and Support Training (BEST) Programme on fungal skin infections has been launched. The modules, aimed at pharmacy assistants, are available from Ceuta Healthcare. Bayer Plc.
Tel: 01635 563000.

# A sporting opportunity for Vantage pharmacists

AAH Pharmaceuticals has launched a permanent niche category to help pharmacists take advantage of the fast-growing sports and recreation market.

Vantage Sports and Recreational Care is being run in association with Whitehall Laboratories and Seton Healthcare.

It is designed to offer an additional business opportunity to pharmacists, while building upon their reputation for offering good health advice in the community.

Under the title 'Active Body Care', the section concentrates on the promotion of a comprehensive range of products, including health goods, vitamins and supplements, injury aids, rubs, analgesics, supports and specialist foot care products.

The package for Vantage members includes a designated GSL sports section (4x1m shelf) within pharmacy, PoS material, specialist leaflets and information guides.

One member of staff can train to become an expert in sport and recreational care through a distance learning package.

AAH Pharmaceuticals Ltd.

Tel: 01928 717070

# Gaviscon goes on TV to help inflame sales

Reckitt & Colman is investing \$2 million in a TV campaign for Gaviscon.

Launched on August 17, the campaign will run for four weeks across Channel 4, Channel 5, GMTV and satellite stations.

The advertising is designed to encourage users of antacids, who often misdiagnose heartburn as indigestion, to use the Gaviscon range to soothe the burning sensation of heartburn.

The commercial features a face in pain appearing through flames which are then quelled with Gaviscon. The flames represent the sensation of heartburn.

Gaviscon brand manager Amanda Williams comments: "By illustrating the soothing benefits of Gaviscon, we are looking to bring those who normally selfselect GSL antacids from grocery stores into the pharmacy." Reckitt & Colman

Reckitt & Colman Products. Tel: 01482 326151.

# Migraleve focuses on childhood



Migraleve is focusing on childhood migraine this year and has produced a booklet on the subject to coincide with Migraine Awareness Week (August 31-September 7).

The booklet is packed with tips and advice for parents and carers of children suffering migraine and includes a diary for logging attacks.

In the UK, up to a quarter of a million children aged 7-15 are affected by migraine. It often goes unnoticed because the associated nausea and vomiting means it is mistaken for common stomach ache.

'A Parent's Guide to Childhood Migraine' can be obtained by sending an SAE to Migraleve/CHIBKT1, MMC, Blacknest, Alton, Hampshire GU34 4PX. Pfizer Consumer Healthcare. Tel: 01420 84801.

# EST PIONAMED NAMED



Theffe FAAACH5



The Galactic MACH3<sup>IIII</sup> has 3 specially positioned blades – each one shaving progressively closer to your beard.



### FEWER STROKES

The Gillette MACH3™ shaves closer in a single stroke, you take one stroke, it takes 3.



## LESS IRRITATION

The Gillette MACH3™ reduces the need to repeatedly shave the same area, thus reducing irritation.

AVAILABLE FROM SEPTEMBER 1ST 1998







# Wella conjures up colour gel

in-one temporary hair colour with the hold benefits of a styling gel.

Shockwaves Magic Colour Gel is aimed at unisex youth market.

The range is being launched to capitalise on the Christmas party season as well as the

temporary hair colouring.

Available in five shades. - Spanish Copper, Aqua Blue, Caribbean Blue, Purple Velvet and Oriental Gold – the gels can be used on any hair type and length. Retail price is £4.95 (50ml).

The range will be supported with a youthfocused campaign in the three months running up to Christmas.

The campaign will include sachet/postcard sampling distributed through bars, clubs and restaurants nationwide. Wella Great Britain. Tel: 01256 320202.



Sensitive solutions from Simple Smith & Nephew introduces two new tube.

products in its Simple skin care range next month.

All Day Shine Control Moisturiser and Vitamin Enriched Cream Bar are both formulated for the needs of sensitive skin.

Simple All Day Shine Control Moisturiser contains micro powders to absorb excess oil and keep skin looking matt.

The product has a light, oil-free formula which is fragrance- and colour-free. It includes a UV sunscreen. Retail

price is \$3.49 for a 75ml

Simple Vitamin Enriched Cream Bar is designed as facial and body cleanser which is enriched with vitamins and moisturisers.

The round bar contains vitamin B5 and vitamin E to help moisturise the skin and vitamin F to build a barrier to stop water loss from the skin.

It comes in a circular carton and retails at £1.29 (100g).

**Smith & Nephew** Consumer Products Ltd. Tel: 0121 327 4750.



# Irene Gari changes face of autumn/winter cosmetics

Visage International is launching four new products in its Irene Gari Cosmetic Solutions range for autumn/winter.

They include Eyebrow Sealer, a conditioning groomer and fixative; Line Free Lips, a lipstick which softens tiny lines

around the mouth; and Make-up Corrector Crayon, a wax pencil to correct make-up mistakes. All three products retail at \$5.95.

New too is Wonderlast Lift, a temporary skin smoothing and tightening

This cool, transparent gel is formulated with natural extracts including arnica and bladderwrack extract plus glycogen and glucosamine. It retails at £6.95.

Visage International Ltd. Tel: 01206 862762.



# Analgesic pack size change COUNTDOWN.



# Only 3 weeks left.

After September 16th, just three weeks from now, it will be illegal to sell paracetamol and aspirin products in packs greater than 32.

So make sure you display old packs prominently and order up new stocks without delay.

Any problems see the SmithKline Beecham Pharmacy mail-out for full details of changes or phone our Helpline on 0500 888 878.

SmithKline Beecham Consumer Healthcare

# **ON TV NEXT WEEK**

Aquafresh Flex Direct: All areas except U, C4, GMTV

Arrid XX: C, A, HTV, W, M, LWT, CAR, C4, GMTV, Sat, C5

Canesten Combi: All areas

Clinomyn Smokers Toothpaste: A, C, C4, C5, CAR, G, HTV,

LWT, M

Diflucan One: B, G, C, HTV, M, LWT, CAR

Imodium Plus: All areas

Just for Men: All areas

Listerine antiseptic mouthwash: GTV, STV, G, A, M, ITV

Macleans The Toothbrush: All areas except LWT, C4, GMTV

Macleans Whitening: All areas except LWT, C4, GMTV

Poli-Grip: All areas except B, CTV, W, C4, GMTV, TSW

Sensodyne Toothpaste: All areas + Sat

Sensodyne Gentle Mouthrinse: All areas + Sat

Slim Fast: All areas

Wella Shock Waves: Sat

Wilkinson Sword, Protector 3D: All areas except Y, CTV, CAR, GMTV,

**TSW** 

A Anglia, B Border, C Central, C4 Channel 4, C5 Channel 5, CAR Carlton, CTV Channel Islands, G Granada, GMTV Breakfast Television, GTV Grampian, HTV Wales & West, LWT London Weekend, M Meridian, Sat Satellite, STV Scotland (central), TSW TV South West, TT Tyne Tees, U Ulster, W Westcountry, Y Yorkshire

# ENROL TODAY

# AND BREAKTHROUGH YOUR PERFORMANCE BARRIER!

# THE SHAVING MARKET

8.9 million men use a systems razor and there are 48% more systems users than in 1991.\*
The number of systems users continues to grow whilst disposable users and double edge users decline.\*
The systems market is worth £129 million and is 5 times bigger than it was in 1988.\*\*

# WHAT THE CONSUMER NEEDS

In independent consumer usage tests, the end benefits identified by men are closeness, smoothness and comfort of shave with irritation identified as the single largest problem.

Up to now the attributes of closeness and irritation have been mutually exclusive.

# Gillette<sup>®</sup> =MACH\_3

3 BLADES, FEWER STROKES, LESS IRRITATION

AVAILABLE FROM SEPTEMBER 1<sup>ST</sup> 1998
MEDIA SUPPORT

Multi million pound media campaign breaks on October 16th 1998









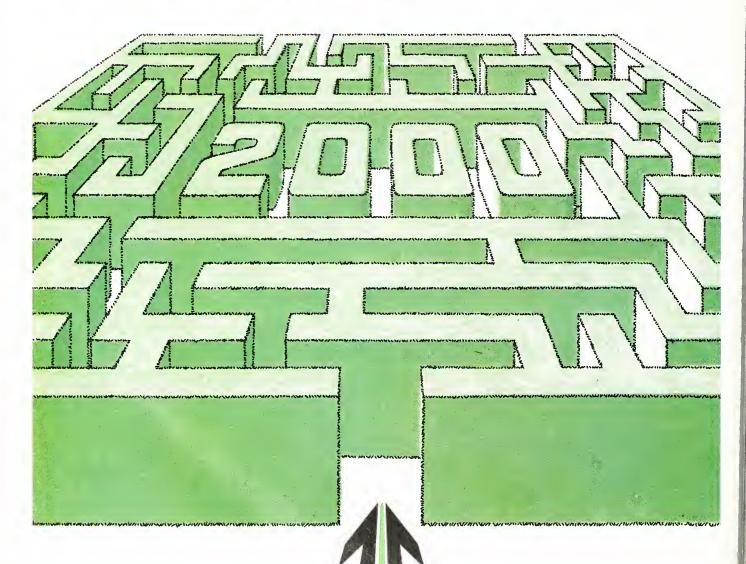
TOTAL 1998 MARKETING SPEND £10,000,000

TOR SLIES ENQUIRIES SOUTH OF THE OILLETTE MACKED FOR THE OILL 8-7 7268

www.MACH3.com

Some The State of the State of State of

# ARE YOU PREPARED FOR THE YEAR 2000?



Computers touch all of us, whether it's in our homes or in business.

For the independent pharmacist your computer equipment represents a crucial cog in ensuring your business runs as smoothly and effectively as possible.

Year 2000 compliance provides many challenges for the businessman and you will need to be certain that your system will continue to operate as it does today. Who knows the effect if it fails to function as you intended.

If you have any doubts or concerns please call us now. We're here to help.

We will work with you to ensure all is in order. Contact UniChem Customer Systems on

order. Contact UniChem Customer Systems on 0181 391 7092/3







# Spa treatment is a breath of fresh air

Finders International is launching its Dead Sea Spa Majik range with an oral cleansing treatment for healthy white teeth and fresh breath.

Fresh 'n White is a three-in-one mineralrich clear liquid made from a formulation containing pure Dead Sea salts and minerals.

The minerals attack and destroy the bacteria that cause bad breath.

The treatment can either be used as an

Caress offers

cotton buds

alternative to mouthwash by placing a few drops in a glass of water, or as an alternative to toothpaste by placing a few drops on a toothbrush. It can also be used as an antiseptic gargle.

Available from September 1, the product will have a special launch price of \$3.95 (normal retail price: \$4.95). Finders International Ltd.

Tel: 01580 211055.

the Nicotinell

Programme.

**Professional Cessation** 

The integrated

smoking cessation

programme brings

together the primary

pharmacists and GPs,

The company is

Medical Journal last

responding to research

published in the British

year, which found that 23

counsellors had stopped

smoking a year after tirst

per cent of callers to a

helpline staffed by

contact, and that it

trained professional

counsellors and a course

health care team of

telephone nurse

of NRT.

la Better Pro

# Bodyform's protective message

SCA Hygiene Products is supporting its improved Bodyform Invisible Ultra Towel range with a \$2.5 million TV advertising campaign

The modern, upbeat commercial focuses on product design and antileak performance.

The campaign began this month and will run until October 18 in the UK and until October 11 in Eire. It is part of an \$8 million marketing support package for the brand this year. SCA Hygiene Products.

Tel: 01322 303057.

# Nicotinell pilots professional cessation programme

Vernon-Carus Consumer Healthcare has added cotton buds to its Caress range of cotton wool

Consumers are offered a choice of plain cotton buds, baby safety buds and make-up buds.

Plain cotton buds are available in round packs of 100 and square boxes of 200.

The baby safety buds come in square boxes of

Ultra-fine make-up buds are sold in packs of

All the products are made from pure, raw cotton, processed without chlorine bleaching Vernon-Carus Ltd. Tel: 01772 744493.

# Singing sensation

Procter & Gamble has signed up pop celebrity Brandy to appear in its TV advertising for Cover Girl's autumn collection, 'Bewitch, Bejewel, Bedazzle'

Brandy's recent gold single 'The Boy is Mine' reached number two in the UK charts. The new commercial hits screens nationwide in September. Procter & Gamble (Health, Beauty & Cosmetics) Ltd. Tel: 01932 896000.

Novartis Consumer caused some positive Health is adding more change in the smoking weight to its nicotine habits of 88 per cent of replacement therapy callers. with the introduction of

The new programme, which is being evaluated over three months, involves GPs and dentists being given a 'prescribing' pad for Nicotinell. Each individually numbered sheet is split into three: the prescription, which is filled in by the doctor; a reply-paid card for the pharmacist to send off for further information: and a card for the patient with the helpline number and details of when their next prescription is due.

Patients bring the prescription to the pharmacy where they will be dispensed Nicotinell, advised by the pharmacist and given the card to take away.

Patients can call the helpline, run by Access 24, between 8am and 11pm, with calls charged at national rates. The line is staffed by registered nurses, trained in smoking cessation counselling. When the patient makes the first call they are registered on the programme which provides support as well as follow-up calls to check their progress.

Novartis Consumer Health is confident that the new programme is likely to increase the success rate. A national roll-out of the pilot. programme is likely during the course of

**Novartis Consumer** Health. Tel: 01403 210211.

# Milupa invests \$1m in direct mail campaign

Milupa has developed a §1 million direct mail programme targeting new or prospective parents.

It is designed to help parents understand complex nutritional issues without breaking the DoH guidelines.

The information includes all aspects of babyfeeding from the importance of LCPs in brain development to advice on balanced nutrition and weaning.

Milupa Ltd. Tel: 01225 768381.



# Special deal

Promotional deals are available on two Bray Health and Leisure products until November.

Pharmacy orders of 24 Avoca Wart and Verruca Treatment sets (rsp £3.25) will receive four free sets. Orders of ten Nix pencils for shaving nicks (rsp £1.39) will get an 11th pack free.

A team of sales agents is being launched by the company to target independent pharmacies directly. Bray Health & Leisure.

Tel: 01367 240736.

# Lyclear change

Kestrel Healthcare has been awarded a four-year contract by Warner Lambert to promote, market and sell the prescription products Lyclear Dermal Cream and Anusol HC in the UK. All orders for these products should now be placed with:

AAH Agency Service. Tel: 01925 242643.

# **Body** building

Colgate-Palmolive is building sales of its body care products in the pharmacy sector with price promotions through Enterprise in September.

Enterprise is offering a 'four for the price of three' promotion on the new look Palmolive Soap as well as price promotions on Palmolive Liquid Hand Wash and across the Palmolive shower and bath products range. Colgate-Palmolive (UK) Ltd. Tel: 01483 302222.

# Cutting edge

**Procter & Gamble is** supporting its Hugo fragrance with a new youth activity programme.

In association with Kiss FM, the company has introduced a series of Hugo UK and US Garage nights at leading UK clubs.

Six pairs of male and female artists have been commissioned to design unique Hugo vending machines which will be located within the club environment. Procter & Gamble (Health.

Beauty & Cosmetics) Ltd. Tel: 01932 896000.

# Getting the best out of our bodies!



The nation is currently being spurred into activity, but what should you consider when a customer asks you about sports health? Dr Tom Crisp, sports physician at the Royal London Hospital, gives some pointers

e are made more aware every day of the need for proper preparation to maximise performance in sport, and this no longer applies only to the elite. Recreational athletes in many sports are copying their elite role models in areas such as nutrition, so expect sportsmen and women to come to the pharmacy with questions about diet or supplements. There are some basic answers to the likely questions, though referral to a sports nutritionist may be necessary for the more difficult problems. The Sports Nutrition Foundation (0171 251 0583) has a list of accredited sports nutritionists who can answer most queries.

The energy for exercise comes largely from carbohydrates stored in muscle as glycogen. So a diet high in carbohydrates is essential, with perhaps as much as 60-65 per cent of the calories coming from this source. The total calories used up and may be as much as 3,000-4,000 calories.

In sports where weight must be controlled, such as boxing or gymnastics, the need to balance calories in with calories out is essential, and imbalance can lead to health problems, such as the loss of periods (amenorrhoea) and stress fractures.

It is easier to replenish glycogen in the first two hours after exercise because of changes in insulin sensitivity during and immediately after exertion. This can be important if training over long periods or repeatedly during the day, so food after exercise or high calorie drinks containing glucose polymers can be useful to get carbohydrates in as quickly as possible.

A normal diet (especially for non-vegetarians) contains enough protein for athletes, even those doing a lot of weight training. Athletes need to eat a balanced diet which contains fruit, vegetables and fibre. If five portions of fruit and vegetables are eaten daily, there is no need for vitamin or mineral supplementation. Even the antioxidants that are all the rage at present will be contained in adequate quantities (especially for regular exercisers) in this diet. If the diet is poor there may be deficiencies, but the answer, even for the busiest professional athlete, should be to eat a proper diet.

Exceptions to this may be vegetarians who may need specialist advice in order to get all the essential elements, and female athletes with heavy periods who might need iron supplementation. Otherwise there is no scientific evidence to support the use of vitamin supplementation.

Do dietary requirements vary from sport to sport? In all sports, both explosive and endurance, the important part of the energy production is from carbohydrate, and it is merely the total calories that vary according to the intensity and duration of exercise. Even in the thinnest athlete, there is enough fat to provide that part of the energy equation, but shortage of carbohydrate is a major contributor to fatigue. Fatigue may lead to poor technique and risk of injury, so good nutrition can prevent this. It is impossible to list every way of preventing injury in this short article, but some are listed below.

Questions about what exercise

## **Prevention of injury**

**Good preparation** 

nutrition, adequate hydration psychological preparation warm and stretch (stretching specifically relevant to the activity)

Proper technique

good coaching and adequate control (especially contact sports) slow progression of workload (intensity and duration)

Suitable equipment

shoes (especially in endurance sports like running)

is best are difficult, and the answer really rests with the individual. The American College of Sports Medicine recommends exercise intense enough to be hard work (with the pulse rate up to 60-75 per cent of maximum – 220 beats per minute minus age) for 30-60 minutes three to five times per week. This is too much for the beginner who should build up exercise gradually. Increasing total workload by 10 per cent per week will minimise the risk of injury.

For people who just want to get healthier, then making exercise part of their lifestyle is important. For them, the recommendations are to accumulate 30 minutes or more of moderate exercise (climbing the stairs, brisk walking, vacuuming the house, gardening etc) during the course of most if not every day. So short periods of exercise – five to ten minutes – all help.

Extreme (anaerobic) exercise has no health benefit, but has big performance benefits. Exercise at these levels, when lactate is accumulated and fatigue is very quick, increases fitness to play many sports and many coaches will exercise in training the athletes at or above the level at which lactate levels rise (lactate or anaerobic threshold) to improve endurance and speed. However, the benefits – lowering of heart disease risk, blood pressure, cholesterol, and diabetes risk – do not apply to short periods of extreme exercise.

For weight loss, there is no easy answer. The accepted wisdom is that diet and exercise must be combined to be effective. Exercise must use up a considerable amount of energy over a long period to be effective. Research is constantly providing new information on how much exercise to take. Organisations such as Re-Energise (01483 728480) and Weight Watchers can provide information.

### **Network of clinics**

And when it all goes wrong, there are sports injury clinics all over the country. With the creation of the UK Sports Institute, a network of clinics will be organised and highlighted, but in the meantime where should one go? Clinics with a doctor and a chartered physiotherapist are probably the minimum standard, and usually the more specialists available, the better the clinic.

The important first step is the diagnosis. With overuse injuries, it is important not just to treat the symptoms but to find the underlying cause and so prevent recurrence. So a clinic with access to diagnostic scans etc may be useful, and this is more likely with the presence of a doctor. The staff should be trained specifically in sports medicine and there are postgraduate degrees for doctors and physiotherapists.

Other disciplines such as osteopathy and podiatry can be very important and if they are not available in the clinic, referral may be possible. A list of clinics is available from the National Sports Medicine Institute (0171 251 0583) and some regions of

the English Sports Council (such as Eastern Region – 01234 345222) have a list of clinics in their area.

The use of analgesics is hotly debated, especially NSAIDs. There is evidence that they are useful in the early period (three to five days) but not after this. Topical NSAIDs have recently been reviewed in the *BMJ* and have been shown to reduce pain effectively in some people. This may speed mobilisation of an injury and so speed recovery.

Analgesia should never be used as a means of masking an injury and getting back to sport early. This runs a large risk of making a minor injury worse, and may do further damage. However pain relief is a major part of the treatment and is why physiotherapists may use ice to help get a joint moving after injury.

To support a joint to play earlier than advisable is risky. However if proper rehabilitation has been followed, then taping has been shown to prevent recurrence. The ankle and thumb are most easily and effectively taped. Early taping of the ankle after injury may enable early mobilisation and walking and therefore help in the treatment.

Rubber and neoprene supports do little more than remind the owner of an injury. During most sports 'internal heating' will be far more effective than any external warming, and there is no scientific evidence to prove benefit from the use of soft joint supports. Advice from a physiotherapist is recommended before using a support for a serious injury. It should not be used as a short cut, but if wearing a support gives an athlete confidence, it may be useful.

Finally the choice of exercise can affect the injury risk. Some sports – swimming, cycling and aerobics – carry a low risk of injury compared with rugby and football. So directing a potential exerciser towards a safe sport is sensible, though they should enjoy their choice if they are to benefit from regular exercise.



Redoxon reintroduced its plain variant after more than 300 people contacted Roche for its return

# Vitamins help you grow, don't they?

The vitamin, mineral and supplements market could grow at 10 per cent per year according to one source. But where will most of that growth be?

ast month, Corporate Intelligence on Retailing predicted the 10 per cent growth in the VMS market would continue, buoyed up by the continued consumer interest in 'health' overall.

In particular, it sees the multiingredient preparations doing best. The total multivitaminwith-minerals category grew 19 per cent in the year to June 15 to a value of \$31.3 million according to 1RJ\*. CIR believes multipurpose VMS preparations for children will also fare well.

However, growth in value of the multipurpose multivitamin and mineral sector has been balanced by decreases in other multivitamin combined preparations such as with cod liver oil (down 27.1 per cent), with evening primrose oil (down 11 per cent), with calcium (down 16.2 per cent) and with iron (down 10.6 per cent).

One of the combined multivitamin preparation categories – with added folic acid – is up a significant 15.2 per cent to \$1.43m. This could correspond with the widespread health promotion activity relating to folate intake and pregnancy.

Among the brands, the trend has been reflected in products such as Centrum. This increased its total sales by 53.4 per cent to \$7.39m in the year to June 15\*, having been introduced to the UK in March 1996. The subbrand Sanatogen Gold Multivitamins increased 25.9 per cent to \$6.9m.

But among the changes, overall it has been the nebulous 'own label' group which has fared better than the next three largest manufacturers among the top ten:

The total vitamins and mineral market fell slightly – down half a per cent to a total value of \$310m\*. So is the consumer looking to own label brands because they perceive them as being better value for money? With growing recognition that health maintenance can mean a long-term commitment to a 'balanced diet', perhaps buyers prefer the less expensive brands if they are going to develop the 'vitamin habit'.

Part of the problem has been caused by the vitamin B6 saga and a scare story in the *Daily Mail* suggesting high dose vitamin C may cause problems. Fish oils have also had unfortunate press coverage over allegations about chemical contamination.

This might help explain the slight drop in Seven Seas' leading osition over the past year. However, the company, brand and its Cod Liver Oil sub-brand all lead

Continued on P18 ▶



Sanatogen Classic 50+ is driving a "thriving new category of vitamins especially for the over-50s", says Roche



Roche's Sanatogen Gold Effervescent "scored fantastically" on taste



Whitehall's Centrum is continuing its links with sports promotion as well as the 'young at heart'



Seven Seas Cod Liver Oil One-aday is helping keep the company and brand in prime position

### ◀ Continued from P17

in the market. And to help correct misinformation, Seven Seas is supporting the Omega-3 Helpline, set up to help explain the benefits of cod liver oil.

Seven Seas cites research at the University of Exeter into complementary remedies where 60 per cent of trialists found CLO the most effective OTC complementary treatment in the relief of arthritis. Part of the problem is believed to be an imbalance in essential fatty acids in the body, with too little of the omega-3 type. This would otherwise have effect blocking an on prostaglandin activity. Call 0845 6024026 for an information pack.

BR Pharmaceuticals anticipates demand for its Valupak range of vitamins and supplements, offering the consumer a month's supply from as little as \$0.99. BR saw turnover double last year and expects a further doubling this year.

Roche's VMS category manager Sophia Smith sees the recent downturn in the VMS market, with MAT down 5 per cent,

as temporary. "The past six months has slowed down, but it will pick up again," she says.

She feels the success of Sanatogen Gold, up 40 per cent year on year, and Sanatogen Gold Classic, up 70 per cent, is because they add value for the consumer. "There will be a set of consumers for whom price is a key driver, but there are others where it is not an issue."

The Classic variety is tailored to the 50-plus market. They are not just looking for a compensatory, they are looking for some extra vitality, she says.

Other key groups are pregnant mothers and children. The latter group, especially, is an area of good growth. Sales in pregnancy receive a boost from the Government and other health campaigns and parents often look to vitamins for help in treating coughs and colds.

Roche is committed to helping pharmacists and will be at Chemex '98 talking about its education programme for pharmacy. "Roche is a firm believer that there is a high preference for VMS in pharmacy with mums, the elderly and kids," she says.

The growth of the Sanatogen Gold products also reflects a general shift towards the multivitamin, away from the single ingredient products.

The bulk of the VMS market is with solid-dose preparations, but Roche is also pleased with its effervescent vitamin C tablets. These are particularly useful as flavours can be added. "As long as it's good to taste, people are loyal to the format."

Sanatogen Gold Effervescent was the first product to include so many vitamins and minerals in an effervescent form, claims Roche. Its orange flavour scored well in consumer trials. This mirrors results for the Redoxon brand which fared well in taste trials – 39 per cent of people preferred Redoxon overall.

Ms Smith believes market penetration is not yet complete. "There's a very rosy future for us, as long as we and the market retailer get it right," she says.

Part of Roche's promotional activity this summer is the \$250,000 campaign for Sanatogen Gold featuring in men's interest magazines in August. Tapping into the *Loaded* laddish culture, the advert highlights the assumed poor nutrition of men by contrasting a muscled torso with two takeaway food cartons.

Roche says men account for 35 per cent of the VMS market and this campaign is a new departure for Sanatogen as it targets the younger male market.

Whitehall is pleased as Centrum and Centrum Select 50+ are continuing to generate "healthy growth" for the VMS market. In

## Total GB value sales: vitamins and minerals

Top ten manufacturers	Year to 15 June 1997 (£000s)	Year to 15 June 1998 (£000s)	% change vs year ago
Own label	£91,697	£98,051	6.9
Seven Seas	£83,368	£81,113	-2.7
Roche Consumer Health	£43,621	£42,026	-3.7
Ferrosan Healthcare	£16,278	£13,308	-18.2
Lichtwer Pharma	£6,566	£8,873	35.1
Whitehall Laboratories	£4,821	£7,394	53.4
English Grains	£5,678	£5,838	2.8
Wassen International	£5,818	£4,986	-14.3
Robinson & Sons	£4,153	£4,339	4.5
Novartis Consumer Health	£3,146	£3,739	18.8
Source: Information Resources In	nc		

### **Total GB value sales: vitamins and minerals**

Top ten brands (excluding own label)	Year to 15 June 1997 (£000s)	Year to 15 June 1998 (£000s)	% change vs year ag
Seven Seas	£71,014	£68.250	-3.9
Sanatogen	£26,477	£25,860	-2.3
Redoxon	£10,966	£10,240	-6.6
Healthcrafts	£10,480	£8,280	-21.0
Centrum	£4,821	£7,394	53.4
Kwai	£4,630	£5,444	17.6
Haliborange	£5,103	£5,367	5.2
Hofels	£5,143	£5,294	2.9
Quest	£4,306	£3,557	-17.4
Red Kooga	£3,097	£3,234	4.4
Source: Information Resources	. Inc		

### Total GB value sales: vitamins and minerals

Top ten sub-brands (excluding own label)	Year to 15 June 1997 (£000s)	Year to 15 June 1998 (£000s)	% change vs year ago
Seven Seas Cod Liver Oil	£49,621	£48,188	-2.9
Sanatogen Multi-vitamins	£12,738	£10,456	-17.9
Redoxon Vitamin C	£9,223	£7,526	-18.4
Sanatogen Gold Multivitam	ins £5,481	£6,900	25.9
Centrum Balanced Formula Multivitamins	a £4,821	£6,291	30.5
Kwai Garlic	£4,234	£4,733	11.8
Seven Seas Evening Primrose Oil	£5,034	£4,519	-10.2
Seven Seas Multivitamins	£4,191	£3,690	-11.9
Red Kooga Ginseng	£2,772	£2,974	7.3
Sanatogen Vitamin C	£2,966	£2,882	-2.8
Source: Information Resources In	c		

March it had a 9 per cent MAT

share\*\*.

The Centrum brand was strengthened last year when Centrum Select 50+ was launched "specifically to meet the needs of the 50 plus generation" says Whitehall's nutritionals group category manager Jo Stopp.

Signing one of Britain's leading golfers, Lee Westwood, to promote the brand broke new ground says Whitehall.

High strength

A Health Plus speciality is the high strength product, and earlier this year, it entered the herbal supplement market with 12 products.

But could high strength prod-

ucts be a growth area? Health Plus believes helping people achieve optimum nutrition will lead to optimum health. "We have long held the view that RDAs represent the minimum amount required to avoid a deficiency and do nothing to promote health," argues company spokesman Martin Betts.

\*IRI Information Resources Inc year to June 15, 1998. Total GB Value Sales includes grocery and drug independents, total Co-ops, multiple chemists (excluding Boots) independent chemists, and key accounts – major supermarkets, Superdrug and Boots).

\*\* IRI Infoscan on the multivitamin market – four weeks ending March 22, 1998 'Education, education, education' was Tony Blair's pre-election pledge. This need not refer just to Britain's schools, all health professionals are being encouraged to promote a healthier nation

# Learning to live in good health

art of the health reforms
the Labour Government
has embarked upon is the
idea of health promotion.
Earlier this year, public
health minister Tessa Jowell
launched a Green Paper, 'Our
Healthier Nation' in which the
Government set out new targets
for the nation's health.

One of the aims of the strategy is for people to "take responsibility for their own health and make healthier choices about their lifestyle".

Its main targets are: "to improve the health of the population as a whole by increasing the length of people's lives and the number of years people spend free from illness", as well as improving the health of the worst off in society and narrowing the health gap.

There are four priority areas in the proposals: heart disease and stroke, accidents, cancer, and



The British Meat nutrition education service has a folder on nutrition relating to pregnancy



The Sugar Bureau provides a newsletter on nutrition for health professionals

mental health, but there is scope for better health in all areas.

Educating people about healthier lifestyles will not be solely the task of the Government, but of health professionals, teachers, social service workers and employers, who are all expected to participate.

The Green Paper gives many pointers to the messages it would like to see people take on board, and says one area for action is to "encourage health professionals to give appropriate advice".

As well as referring directly to the Paper for pointers, pharmacists, as primary care health professionals, can also benefit from the wealth of health advice that is being distributed from a variety of sometimes unlikely sources, especially when it comes to nutrition and health.

### **Sweetmeats**

British Meat may not appear very often in the pages of *Chemist & Druggist*, but its nutrition education service is one of the many food-related groups which offer health professionals nutritional information.

Food truck, British Meat's quarterly newsletter for health professionals, focuses on a particular aspect of health and nutrition in each issue.

Among subjects covered so far have been iron, physical activity and adolescent issues. The newsletter also contains information about the latest research, current issues and advice that can be passed on to customers.

Earlier this year, a nutritional information guide, relating to birth, lactation and weaning, was issued for health care professionals. The pack, *Food in focus*, can be used as a tool for presentations on nutrition.

Copies of the newsletter or nutrition guide can be obtained from the British Meat Nutrition Education Service, Suite 2, Cobb House, Oyster Lane, Byfleet, Surrey KT14 7DU. Tel: 01932 350006 Another food organisation, the Sugar Bureau, representing UK manufacturers of sugar, "aims to improve knowledge of the contribution of carbohydrates, including sugars, to a healthy balanced diet".

It produces a comprehensive range of newsletters and customer leaflets as well as two free newsletters – one for health professionals, *Practice Nutrition* and another specifically for nutritionists, *CHO Carbohydrates*.

Health professionals interested in the Sugar Bureau's education services should contact Beverley Vardigans for further information. She can be contacted at the Sugar Bureau, Duncan House, Dolphin Square, London SWIV 3PW. Tel: 0171-828-9465, fax 0171-821-5393.

To add your name to the *Practice Nutrition* mailing list, contact Advisa Medica at Gordon House, Station Road, Mill Hill, London NW7 2HZ. Tel: 0181-906-2767, fax 0181-906-0261.

### Closer to home

Quest Vitamins has just issued its 13th Research Bulletin which looks at nutritional science developments, it provides summaries of papers from various medical journals as well as original articles on vitamins.

Health professionals can be placed on the mailing list by con-

tacting the Nutritional Department, Quest Vitamins Ltd, Birmingham B7 4AP, Teb 0121 359 0056, fax 0121 359 0313,

Earlier this mouth, Johnson & Johnson's Lifescan set up a diabetes education initiative. It aims to provide pharmacists with information on how to maximise their role in diabetes care.

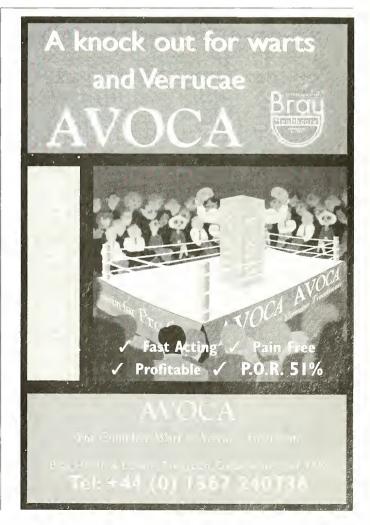
The network will provide a range of information on how to help customers achieve better control of their condition and to stay healthy.

Appearing regularly in C&D at the moment (and most recently with issue no 8 on June 20) is the Vitaforum—newsletter—from Henkel, looking at some of the latest research findings concerning vitamins.

Pharmacists wanting copies should contact Vitaforum on Freepost SEA0968, PO Box 53, Hampton, Middx TW12 2BR

And only this week comes news of Lanes launching an advice service for pharmacists and their customers. The move follows a two-year trial of the Lanes Information Service direct with consumers

"We're very conscious of the increasing role of the pharmacist in primary health care so we wanted to offer [pharmacists] some support in advising customers," said Vere Awdrey, Lanes marketing director.



# New view of ginseng

or many years, ginseng was seen as the herbal remedy that could be the cure for everything. Indeed, the Latin name Panax alludes to its alleged panacea-like qualities. But like most things 'alternative', ginseng's word of mouth reputation has heavily outweighed the scientific facts in terms of its efficacy.

In defining the health promoting activity of ginseng, it is hard to describe an inunediate effect. But after continued use, ginseng is claimed to help the body build up resistance to stress and fight infection. As such, it has been called an adaptogen – it won't necessarily do anything noticeable for a healthy body, but can help the body adapt to imposed biological stresses.

From a pharmaceutical view-point, the wide range of active ingredients means that there will be a degree of activity enhancement, competitive inhibition and total inhibition of individual compounds. The authors of 'Herbal Medicine', Carol Newall, Linda Anderson and David Phillipson, suggest that these opposing actions can explain the adaptogenic reputation.

However, they conclude that "when used appropriately, ginseng appears to be relatively nontoxic" with most of the documented side effects being associated with inappropriate usage. A couple of reports of a suspected drug interaction with phenelzine are also noted.

Earlier this year, one licensed medicine containing ginseng was re-evaluated and is now being promoted with emphasis on the health benefits that ginseng brings to the product.

As well as containing vitamins and minerals, Boehringer Ingelheim Self Medication's Pharmaton Capsules include ginseng extract, G115, which has its ginsenoside content standardised.

BISM is targeting Pharmaton at people who suffer daily fatigue, reportedly two-thirds of adults in the UK. Figures suggest up to 30 million working days are lost each year to stress-related illnesses.

The Red Kooga Ginseng brand has also seen a healthy increase in sales. In the year to June 15, the brand took tenth place with a value of \$3.23 million, up 4.4 per cent on the year according to IRI. Its Red Kooga Ginseng product fared slightly better, placed ninth in the top ten sub-brands, excluding own label, with an increase of 7.3 per cent to \$2.97m.

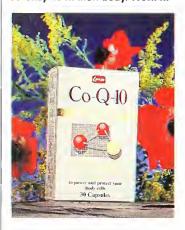
# Effico new look

Effico Tonic was reformulated earlier this year to give it a new flavour and colour. The new look Effico is now an orange colour with a mixed-fruit flavour. The active ingredients and price remain unchanged.

Pharmax Healthcare Ltd. Tel: 01322 550550.

# Co-Q10 for gums?

Co-enzyme Q10 can play a significant role in keeping gums healthy, says Lanes, manufacturer of Co-Q10 and Co-Q-10 Gold capsules. Research in the USA found patients with gum disease tended to have low levels of the naturally occurring co-enzyme in their body. Work in



Japan suggested that coadministration of co-enzyme Q10 with other dental treatment can help treat gum disease. GR Lane Health Products. Tel: 01452 524012.

## Glucosamine trials

Health Perception is sponsoring UK trials of the supplement glucosamine in helping sufferers of osteoarthritis. A consultant rheumatologist contacted the company after several of his patients had claimed they were getting some benefit from taking the supplement.

Forty patients in the trial are taking 1,500mg of glucosamine sulphate daily for six months and are being compared with a similar sized group taking a placebo. The trial results are expected early next year. Health Perception. Tel: 01344 890115.

## Garcinia and HCA

Hydrocycitric acid (HCA), extracted from the dried fruit rind of the South Asian Garcinia cambogia, may have a role in weight control and related metabolic conditions, believes Pharma Nord.

It says that the levo isomer of HCA, which is particularly abundant in Garcinia, can help reduce fat production from carbohydrate (lipogensis) in the body. Pharma Nord has incorporated the rind extract with chromium, co-enzyme Q10 and carnitine into its new dietary supplement, Bio-Slim, launched this summer.

Pharma Nord (UK) Ltd. Tel: 0800

Pharma Nord (UK) Ltd. Tel: 0800 591756.

## Abidec's lead

Children's multivitamin drops Abidec is claiming the number one brand spot in its £2 million sector with an 80 per cent share (Nielsen April/May 1998). Warner Lambert Consumer Healthcare. Tel: 01703 641400.

# Soft & chewy

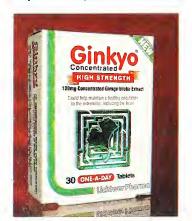
Bassett's Jelly Babies Soft & Chewy Vitamins from Jacksons is staking a claim for most popular children's vitamin supplement. Nielsen data for January and February indicates the vitamins have the fastest pack rate of sale of all children's vitamins in pharmacies, says supplier Jacksons. The range is being extended with New Bassett's Soft & Chewy Multivitamins, with added fibre. Ernest Jackson. Tel: 01363 772251.

## Eye, eye

A review of over 30 studies published in the international scientific press and the US Council for Responsible Nutrition are both recommending the use of antioxidant supplements to help the eyes resist the development of cataract and age-related macular degeneration. Copies of the journal review are being made available to health professionals by Self-Care Products, manufacturers of Aphrogen Shield antioxidant capsules. Self-Care Products Ltd. Tel: 01494 722741.

# Ginkyo support

Lichtwer Pharma is supporting its Ginkyo Concentrated One-A-Day 120mg ginkyo biloba capsules this year with a £1m



advertising and PR spend, featuring recommendation by Dominic O'Brien, the five times World Memory Champion. Chemist Brokers. Tel: 01705 222500

## **CLArion call**

Conjugated linoleic acid (CLA) is a nutrient found in certain high fat foods of animal origin which may have a beneficial effect on blood cholesterol levels and blood pressure, says Swiss Health.

Low fat diets and changes in farming mean CLA intake has dropped by up to 80 per cent over the past 20 years, meaning the lipid lowering and antioxidant activity is reduced. Swiss Health has launched Powerlean capsules, containing concentrated CLA made from safflower oils.

Powerlean is being supported with a national advertising campaign in newspapers, men's and women's interest and health magazines.

Chemist Brokers. Tel: 01705 222500.

# A rising star?

Starflower oil, high in gamma linolenic acid, could be a health and beauty 'lifesaver' believes



Roche Consumer Health, manufacturer of Floresse. This contains the oil with additional nutrients.

Three month trials found threefifths of women users reporting it had helped to improve their skin, a fifth reported an improvement in their general wellbeing, and double that reported improved nails.

Floresse had an 8.5 per cent share of the £30.5 million GLA market in May, says Roche (MAT source, IRI).

Roche Consumer Health. Tel: 01707 366000

## **CHIC stress**

The Consumer Health
Information Centre's anti-stress
campaign, launched last month,
is being backed by Roche
Consumer Health, manufacturer
of Berocca. With the reputation
of B vitamins for helping stress,
Roche hopes the campaign will
increase understanding of the
problem.

# Concepts in consultation

lf you'd like ideas for designing a successful consultation area for your pharmacy, the concept shop at Chemex '98 will be worth a visit.

Designed for Unichem by specialist pharmacy shopfitters Crescent Ltd, the concept shop focuses on creating greater interaction between the pharmacist and customers.

"Our aim is to enable pharmacists to make themselves, their products and services more 'upfront' and accessible to the customer," explains Peter Skinner, marketing controller of

The concept shop will feature two design concepts of high street and health centre pharmacies incorporating two different sizes of consultation areas tailored to appropriate needs.

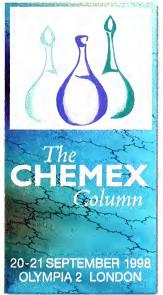
For short but immediate and private advice in a health centre Crescent.

enclosure at the end of the counter which customers would see on entering the pharmacy. This aims to encourage the customer to approach the pharmacist and air any problems or concerns in private.

For more sizeable pharmacies in the high street, a larger pharmacist's consultation area has been designed for Chemex '98. This will be partitioned off by a clear Perspex screen (approximately 4ft high). A glass top and a blind could be applied for extra privacy.

The room can be used to accommodate visiting specialists or district nurses and enable consultation for complex treatments such as alternative healing, diagnostic testing or counselling.

Peter Faux of Crescent Ltd comments: "We have been developing the consultation area concepts over the past few years and



pharmacists have met our ideas with great enthusiasm.

"We are creating a platform for the pharmacist to come into the open to promote the wide range of primary health care services he or she can offer to the customer.'

Value? It's In

Name

Advertisement



With today's fast and furious lifestyle, maintaining a healthy diet may be just a bit too much for some people without some extra help.

"Vitamins and supplements are now a recognised and accepted part of today's busy lifestyle" reports Phillip Byrne, Managing Director of BR Pharmaceuticals. "However, with nutritional experts recommending that we add a full spectrum of supplements to complement a healthy diet, it can be expensive. At BR Pharmaceuticals we offer the Valupak range of Vitamins and Supplements to support consumer's nutritional needs. We keep prices as low as possible and our recommended retail price of just 99p for one month's supply represents exceptional value."

With a range of 13 products to choose from, the Valupak range can meet the needs of all your customers' requirements.

For more information about Valupak Vitamins and Supplements or to place an order, contact your Trinity representative on:

01923 788 080 or

BR Pharmaceuticals Ltd. 21 Chapeltown, Pudsey, Leeds LS28 7RZ. Tel: 0113 256 5836.

# Ginseng offer at Chemex

Visitors to the Healthaid stand at Chemex '98 will be able to take advantage of a special offer on Sibergin GR2500 and Ginkgo Vital 3.

During the exhibition, visitors

will be able to get products three free for every six of both products ordered.

A strong ginseng capsule, GR2500 Sibergin contains a paste extract from a standardised root formulation.

Ginkgo Vital 3 combines the benefits of two types of ginseng with ginkgo to assist mental clarity.

Pharmadass Ltd. Tel: 0181 991 0035.



# Read all about it – at reduced rates

Both potential and existing stockists of Family Doctor Books will be able to save 20 per cent on orders of titles in this series at Chemex '98.

Five packs of books will be offered for the price of four. Pharmacists can choose titles

from the full range including the two new titles 'Understanding Heart Surgery' and 'Understanding Coronary Heart Disease'.

A range of display fixtures will also be on show.

**Family Doctor Publications.** Tel: 01295 276627.

# Body care for men is shaping up

SR Cosmetics will be launching French Heros body care products for men at Chemex '98.

From Homo Parfums of Cannes, the body care products join the EDT which came on to the UK market earlier this year.

The three new products are aftershave balm, shower gel and a

They are presented in shapely bottles which reflect the design of the EDT's flask, derived from a 2,000-year-old Greco-Roman

SR Cosmetics (UK) Ltd. Tel: 0181 201 1777.

# In the picture

Agfa will be focusing on the latest D&P minilab equipment and digital imaging systems at Chemex '98.

On display will be the Agfa MSC 101 minilab which has a 1.3 square metre footprint. This machine combines film processing, paper processing and printing. It has a production capacity of 25 films per hour.

Agfa-Gevaert Ltd. Tel: 0181 560 2131.

# Protec's net bedding covers say goodnight to bed mite blues

A selection of polyester net bedding covers that claim to kill 100 per cent of house dust mites in bedding within eight weeks will dominate Protec Health International's stand.

The Astex range of covers is designed to keep bedding clear of mites for two years and is being marketed as an alternative to sprays and powders that require repeat applications.

The covers are treated with a small amount of permethrin and fitted on to mattresses and around pillows and duvets under normal bedding. The dead mites and faeces, blamed for triggering asthma attacks, should be then vacuumed off every two months.

Protec will also be displaying its range of insect repellents. Protec Health International Ltd. Tel: 01285 850900.

# Communicating with confidence

Dr Terry Maguire, director of the Northern Ireland Centre for Continuing Pharmaceutical Education and Training and a pharmacy contractor in Belfast, discusses the benefits that communication techniques such as neurolinguistic programming could bring to patient relationships

n the 1980s communication skills were introduced into pharmacy with a recognition that their use could significantly benefit practice and patients. It took considerable convincing of the die-hard scientists in the profession that there would be value in teaching questioning, listening and explaining skills both at undergraduate and postgraduate level, as well as teaching an understanding of the influence of non-verbal communication. The communicators won and schools of pharmacy were required to include these skills within the pharmacy degree.

Some people naturally good communicators and the science communication skills allows the less skilled to learn the tricks and emulate the experts. Basic communication skills have benefited the pharmacy profession and are fundamental to ensure

that we communicate effectively with those we seek to serve.

Neurolinguistic programming (NLP) is the new frontier of communication science but is more than simply communication skills. It enshrines personal development and excellence. It is the process of modelling the skills of those who have achieved greatness in life so that the rest of us can benefit from skills in counselling, business, personal development and accelerated learning.

NLP has its origins in the 1970s in the USA where two linguistic experts were modelling outstanding therapists. The therapists they modelled were consistently able to resolve complex personal and interpersonal problems where other equally qualified therapists failed.

The question the linguists asked was "Why?" Why was it that some therapists were capable of communicating more effectively with patients, bringing about desired behavioural changes, while others, equally trained, were not? What they

Everyone lives in their own reality built from their impressions and perceptions

found was a completely new approach to interpersonal communication – NLP.

NLP developed from this beginning in two connected ways. It is a process to discover patterns of excellence in any field of activity and it allows us to see the patterns in thinking and communicating used by outstanding people, patterns that can be learned and mimicked.

NLP acknowledges the fundamental idea that all behaviour stems from our neurological processes of seeing, hearing, smelling, taste, touch and feeling. In short, we experience our world through our five senses and this is the only information we have about the outside world.

We process external information and this elicits a response – our behaviour. In a human being, body and mind form an inseparable unity. Most of our behaviour is subconscious and has been learned, mostly in childhood. Considering the name NLP in detail we find that:

'Neuro' covers our thought process based on the information we have received and the response that we make to this information. Basically, it is the Pavlov's dog response. At a more complex level, it explains why some people are motivated to kill in response to certain stimuli.

'Linguistic' indicates that we use language to order our thoughts and behaviour and to communicate with others. The words used can often have a profound effect on how we receive the message. Words themselves will trigger the opening of 'memory files' in our conscious and subconscious mind and once opened these files will lead us to some course of action.

'Programming' refers to the way that we choose to organise our ideas and take action to produce a desired outcome. The world around us is too complex for the human mind, therefore

our minds simplify it using 'filters'. These filters are extremely useful as they allow us to develop beliefs that will dictate our actions, both intentionally and unintentionally, to produce our behaviour.

Everyone lives in their own reality built from their impressions, perceptions and experiences in life. It is well known that two people living in a similar environment can have very different views on life. One may be very happy, the other depressed – the difference is the way they respond to the environment.

NLP is receiving considerable attention from large businesses and political parties. They recognise that the skills and the techniques developed within NLP can be used to influence people. People that we influence are useful to us. If you are a business they buy more from you, if you are a politician they might vote for you.

NLP has developed a series of skills that allow us to improve our personal performance.

Rapport

To be in rapport with someone is to be in harmony with them. To get into rapport you must mimic their view of the world. This involves empathising with their world view and mirroring their sensory perception. When rapport is created you are then in a position to exert influence on them - ethically this influence should be for good. It has been found that each of us will have a dominant view, or representational system, based on one of the three senses; sight, hearing and feeling. We allow those who talk with us an insight into our dominant representational system by the language we use.

People who are visually based will say: "I see what you mean". People who are auditory based will say: "I hear what you are saying" and people who are feeling based (kinaesthetic) will say: "I feel I understand you".

Once you are aware of a person's dominant representational system the trick is to copy, or mirror it. By doing this you create rapport and once in rapport you can influence the person to accept your point of view.

Everyone now knows, or has heard of, the benefits of positive

thought. Those who do well in life are those who decide what they want - thinking in the positive rather than what they don't want - thinking in the negative.

It is this simple but many of us do not have the courage to do it. We sit in jobs that are unfulfilling, unwilling to attempt to change because we constantly imagine the negative things that will happen if we do. NLP has developed a number of skills that allow us to 'reframe' situations, for ourselves or for those we are communicating with, so that they may be viewed more positively.

### The Switch Pattern

The Switch Pattern is a powerful technique that changes the way we perceive things. It works on a specific behaviour you would rather be without, or a response that you would rather not make. and is an excellent technique for getting rid of unwanted habits. Rather than replacing the behaviour, it produces a change.

### Pharmacy and NLP

So what could NLP bring to the practice of pharmacy? Most of our work involves communicating with customers, other health care professionals and patients. In the past few years we have seen the introduction of protocols for the sale of OTC medicines. Fundamental to this has been questioning skills. A number of reports have suggested that, in pharmacists' opinion, customers resent being asked these questions. If rapport is created, using NLP techniques, pharmacists would find that questioning would not only ensure the safe use of medicines, but it would ensure that the patient left the pharmacy with a more positive appreciation of the pharmacist.

The area of patient compliance, adherence and concordance is ripe for the application of NLP techniques that could realise the potential that pharmacy has to improve medication compliance and management.

In smoking cessation training, we have been using some NLP techniques that challenge pharmacists' beliefs and invite them to change. By doing this they come to realise the commercial and professional benefits of providing a smoking cessation service in their pharmacies and are more likely to introduce it successfully on an ongoing basis.

Accelerated learning techniques have been developed from NLP, which could allow pharmacists to develop new knowledge bases and practice skills more quickly, to enhance and expand the role that they undertake.

NLP is a huge subject and books are available which look at its different applications. It has <mark>much to offer pharmacy.</mark>

# Visual perceptions

## Raj Zavery of the Aberdale Pharmacy in Leicester recently decided to explore a new business opportunity with prescription spectacles

In any business one needs to be constantly on the lookout for new opportunities to increase one's presence on that shelf we call competitive retailing.

This can be done in two ways: intrinsically by offering a better service level, eg reducing owings on scripts by implementing that automated stock control system you have in your pc

extrinsically by introducing a new service or product.

ln a business like retail pharmacy that is regularly threatened by major events such as the possible loss of RPM, and by 'lesser' ones like the imminent imposition of restrictions on sales of analgesics, an ideal initiative should obviously generate more business and have a degree of exclusivity. If it can also enhance one's professional image, this is a welcome bonus.

Last summer we ordered a range of ready-made reading glasses from Superspecs from Direct Perception of London. We then decided to try their prescription spectacle service.

This service, targeted at pharmacy, costs \$265 to sign up for. This includes everything needed to get started: a range of frames to cater for different facial types and fashion requirements, sample tints, display stand and materials.

The company even supplies a special measuring device which enables its laboratories to adjust the frame to fit the customer. This was supplied with an 120 days 'money back' guarantee. With only the possibility of losing \$25 for administration costs, the risk seemed negligible.

Before the glasses opportunity came along I had considered other areas such as diagnostic testing and healthy living. The cost, time involved and return didn't equate.

My experience with prescription glasses has shown it to be less specific to customer groups. This service seems to appeal right across the social spectrum.

A large part of its appeal is price. The exorbitant charges made by opticians make the prices that we charge almost

incredible. Speaking to customers. I've learnt that the average spend on single vision spectacles is \$150.

Compare this to the average price of \$37 that we charge, and the 'buy one pair, get the second pair free' offer from some opticians seems strangely hollow, especially when you realise that offers like these often apply to the frames only.

Price as the sole basis for a successful, long-term service is not enough. Quality is equally important and your spectacle lenses must comply with BS 2738, be Doll approved, and meet all European regulations.

Lam in a fortunate position in that my proprietor, a pharmacist, and director of the wholesale business PIF Medical Supplies, lent his support to this initiative. We took the plunge without the endorsement or assurance associated with dealing through a wholesaler/buying group, and it has proved worthwhile.

At Aberdale Pharmacy we recently installed an EPoS system. It allows me to monitor optical sales, and more importantly, compare them with other areas. The two one-metre shelves allocated to the spectacle display

units are more profitable than many of our standard lines such as baby foods and health foods.

It goes without saving that offering any new service involves education. Direct Perception provides a concise training manual, video and telephone support.

The additional skills required include an ability to put patients at ease, a steady hand, and a keen eye for measurement. The whole process takes about 15 minutes. The order form takes five minutes to complete, is sent postagepaid and the completed spectacles are returned within ten days.

Customer reaction to our inhouse optical service is consistent. Initially there is surprise that we sell prescription glasses, followed by astonishment when we quote the price.

Interest seems to be growing as regular customers spread the word. I feel that while many people want an inexpensive second pair of glasses, growth in the future will come as peoples' spectacles need renewing and they use this service.

It's not often in a busy community pharmacy that there is cause to get excited, but I feel I have found something that gives me a personal and professional buzz.



# SetonScholl, the merged group comprising Seton Healthcare and Scholl, has emerged with a minimum of fuss. Its impact on international markets is expected

etonScholl can afford to feel a little smug as financial journalists vainly try to convince Smithkline Beecham and Glaxo Wellcome to set up another deal.

to grab far more attention, as Guy L'Aimable reports

In contrast to the Smithkline/ Glaxo debacle, Seton/Scholl's merger has run like a case model. The merger was publicly proposed in early May – about a month later it had been sealed.

lt was not, of course, a spur of the moment move. lain Cater, Setonchief Scholl's executive (for-Seton's merly chief executive), says the two companies have known each other for a long time. Mr Cater and Dieno George, Seton's deputy chief executive, first sounded

out the possibility of a merger with Stuart Wallis, Scholl's chairman, in 1996.

Full blown merger talks did not begin until late last year and, in January, their management teams began to iron out the details.

What have they got now? An \$800 million group whose interests range from OTC products and wound management to foot care brands and retail outlets. The group's international infrastructure spans more than 28 countries, while annual sales top \$300 million.

### Equal share

Seton has always stressed it has been a merger of equals, which is reflected in the group board: ten directors, five from each company, three of the non-executives come from Scholl's board, two from Seton.

Norman Stoller, Seton's chairman, takes on an 'ambassadorial role' as president of the group. Stuart Wallis is the group's chairman.

From Seton's perspective, the group is an ideal vehicle for its brands' global expansion. Mr George, now the group's manag-



lain Cater (left) SetonScholl's chief executive with Dieno George, managing director for global marketing and UK sales. The two companies have known each other for a long time

ing director for global marketing and UK sales, says Seton is no longer hampered by its UK roots. "We've always been disadvantaged by the lack of an international network, in terms of product development plans and our investment criteria. We've always said: 'let's treat the UK as our core market'. It isn't really good enough for a group that has the aspirations we have."

Considering that the UK/Eire accounted for 86 per cent of Seton's sales, its previous outlook was understandable. The company's overseas sales are handled by distributors, some of whom do a better job than others. Seton wants to switch the sales responsibility to Scholl's overseas subsidiaries.

"We would obviously do a better job if we had control over our own brands overseas," says Mr Cater. "In the markets, where we would choose to do this, we would also obtain the margins. And we wouldn't have the set up costs of establishing subsidiaries overseas because they're already within the merged group."

Seton's operating margins were an enviable 24.5 per cent, mostly because it produces 70 per cent of what it sells. The group's margin is 17.4 per cent, although SetonScholl plans to lift that to 20 per cent within three years. Removing the distributors 'cut' from brands they sell overseas will ultimately lift its profits.

Launching brands abroad will also be easier because Seton can do it through the group's subsidiaries, instead of negotiating terms with distributors.

### **Ideal** candidates

Mr George says Prosport, Meltus and selected head lice products are ideal candidates for international expansion, along with products the group develops.

Distributors, he says, are not usually prepared to put a lot of effort into building up new products, whereas the new arrangement gives SetonScholl the flexibility to switch marketing expenditure from one brand to a newcomer.

Seton would have no problem meeting the potential demand abroad – its plants generally operate on a single shift basis, five days a week. "We really will have succeeded if we need extra capacity – that would be heaven," says Mr George.

Another avenue is Scholl's retail outlets – it owns 60 in the UK, 18 in Scandinavia, ten in Spain and two in Switzerland. The group aims to introduce some Seton brands, perhaps Prosport and back supports within the stores. "We have to take a really good look [at the options] because retail space is at a premium," says Mr George.

Scholl's brands are particularly strong in Italy, where the company has access to 4,000 specialist orthopaedic outlets. "Seton's orthopaedic soft goods

would obviously fit well there," he adds.

Mr George admits Seton once thought that Scholl stores were footwear specialists. Over the past 12 months, however, Scholl has been moving to "higher value-added practices", such as chiropody. Each store, for example, has a number of qualified chiropodists. With foot care now accounting for 17 per cent of the stores' sales, compared with 13 per cent previously, the stores are emerging from a gloomy period that saw them operating at a loss. Last year they made a 7 per cent return on sales and the ratio is improving this year, according to Mr George.

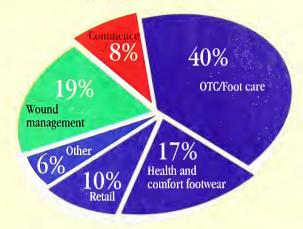
### Cost cutting

In tandem with these strategic plans, SetonScholl is trimming costs by cutting out unnecessary duplication. The programme, expected to last up to two years, involves a new head office called Toft Hall in Knutsford, Cheshire. Mr Cater says the new location suits the group's international outlook – the site is about 15 minutes from Manchester Airport, which is convenient for SetonScholl executives travelling abroad.

Scholl Consumer Product's head office in Luton will be closed by December. The group hopes most of the site's 150 staff will move to Toft Hall.

# Group sales by Core Categories

Combined Year-ends 1997/98 (£m)



SetonScholl also aims to save money by having one development team in north-west England, not two, although it will invest more in development programmes.

Various Scholl products, worth several million pounds, will be produced by Seton plants. "We'll bring them in-house very quickly, so the manufacturing margin currently earned by third party [for Scholl's products], will be captured by the merged group," says Mr Cater.

SetonScholl will combine its sales forces to make a 40-strong team covering pharmacy, drug stores and grocery. The team will be retrained to give advice on both Seton and Scholl brands. About 15-20 representatives could be made redundant.

The group's international sales and marketing infrastructure will remain unchanged.

Mr George says pharmacists should benefit because the group's reps will be visiting them more often. SetonScholl, meanwhile, could combine the two companies' promotional and merchandising campaigns.

### Integration target

Within 18 months, SetonScholl's operations should be fully integrated.

Where does all this activity leave Seton's acquisition plans? For example, the company spent \$41.6 million in the past financial year on a combination of brands and businesses, the biggest of which was Thackraycare, a supplier of branded continence products.

Mr Cater says the size of the group should spur more acquisitions. It can afford to spend at least \$50 million over the next 18 months without having to raise more funds from its shareholders.

## Looking abroad

As the integration process is largely occurring in the UK, SetonScholl's overseas businesses may set the momentum for acquisitions over the next 18 months.

Speculation has focused on one ideal acquisition: Scholl in the US. The firm is owned by Schering Plough, which has no plans to sell it. But the omens look good, since Scholl does not fit into Schering's predominantly pharmaceutical set-up. Scholl US, could be worth about \$200 million.

Scholl alone would not have been able to afford its US namesake. SetonScholl is another matter. The smart money is on SetonScholl making a bid for Scholl US in about 12 months time.

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CHEMIST & DRUGGIST 22 AUGUST 1998

Nature of Business:

Access 24 is the UK's leading provider of 24-hour health information phone lines. Maria Murray visits its Reigate HQ to find out where pharmacists fit in

# Un call around the clock, 365 days a year



Pharmacist Andrew Wilson worked at Boots before joining Access 24

all centres are popularly imagined as scenes of controlled frenzy - operators desperately trying to reach their targets, supervisors stalking the room looking for slackers, and the constant ringing of banks of telephones. So the air of calm reassurance that pervades the Reigate offices of Access 24 is a pleasant surprise. Quiet voices, the gentle click of a mouse, and a few short rings of the phone, are the only sounds to be heard in the large airy room. Yet Access 24 is the UK's leading provider of 24-hour healthlines, handling hundreds of calls a day on topics as diverse as thrush, asthma, and cancer.

Managing director Leuw says the service is not competing with health care profes-"Health care has changed to become more patient focused and we are working with GPs and pharmacists to ensure the patient gets maximum support and benefit from their treatment."

Access 24 was established in the UK in 1996 as a joint venture between PPP Healthcare and Teletech. It provides a telephone health information service to customers of large health care companies. Its 60-strong team includes pharmacists, registered nurses, counsellors, midwives, dieticians, physiotherapists and social workers who handle each case on an individual basis rather than working from a set script,

Operators never speculate or diagnose on the phone. The company sees its role as supporting the GP/patient relationship, not interfering with or replacing it.

"By responding to queries with factual information, Access 24 helps empower patients, so they are in a position to make deci-

sions about their own health," explains Mr Leuw.

Drug queries account for more than 20 per cent of calls. They often come from patients experiencing minor side effects. If they do not receive reassurance, patients are likely to discontinue treatment. Often one phone call providing information in plain English is sufficient to allay fears about interactions or adverse effects. Mr Leuw describes it as a "virtuous circle" because when patients comply with their medication they are more likely to recover more quickly, reducing pressure on GPs and NIIS resources.

Support systems

New technology is central to the effectiveness of Access 24. An impressive bank of computer equipment ensures that all information is constantly backed up and stored safely. Every eventuality, including a bomb attack, is prepared for.

There are 300 lines available with quality checks at each stage of the process. All calls are computer logged and there is a follow-up call facility, digital voice recording of all calls, and archiving of all calls for seven years.

If callers want further information, operators can, at the press of a button, send out some of the 140 fact sheets which have been approved by a GP panel.

Powerful geographical mapping software provides details of pharmacies, dentists, doctors and other services in the UK and throughout the world.

The medical library, or 'cybrary', is the largest privately owned medical information library in Europe, constantly updated by two medical librari-

Its databases enable Access 24 pharmacists to offer travellers advice on vaccination requirements, prevalence of disease in particular regions, water and food safety and the latest information from the Foreign Office on political or civil unrest.

However, all the hi-tech equipment would be of little use without the knowledge and experience of the staff. The team's multidisciplinary nature enables Access 24 to provide advice and support to callers on all aspects of health and wellbeing, and refer where necessary.

## Who uses it?

PPP Healthcare, Bayer, Boots the Chemists and Novartis Consumer Health are just a few of the major clients using the service. Patient groups, including the Impotence Association, also recognise the value of such a service for sufferers.

Bayer's customer health care line, the Canesten Thrush Advice Line, offers consumers instant access to expert advice. Many women find thrush an embarrassing subject to discuss, either in a GP's surgery or a pharmacy. The helpline combines privacy with the reassurance of speaking to a medically qualified person.

From a company perspective it adds value to the Canesten brand beyond the point of purchase and helps build customer loyalty in a competitive market.

Novartis Consumer Health is using Access 24 in a three-month pilot project to help smokers using Nicotinell to quit. Registered nurses trained in smoking cessation counselling offer advice, support and follow-up calls. The company decided to use the service after research published in the British Medical Journal found that 23 per cent of callers to a helpline staffed by trained professional counsellors had stopped smoking a year after first contact, and that there had been some positive change in the smoking habits of 88 per cent of callers.

PPP Healthcare is the UK's second largest private medical health insurance company. Its 24-hour Health Information Line is recognised by policy holders as a key benefit. They are encouraged to contact the helpline before taking any other action. In this way callers are directed to the most appropriate help point - pharmacist, GP or hospital – which benefits both patient and insurance company. Over the past two years Access 24 has handled more than 125,000 calls from 70,000 policy holders. Another bonus for PPP Healthcare is that there has been a 50 per cent increase in loyalty for its customers who have used the information line.

Ask a pharmacist

Three pharmacists are employed by Access 24 but Mr Leuw hopes to increase this to ten to cope with the increasing workload. An ability to communicate is probably the most desirable skill, so applications are welcome from all branches of pharmacy.

Pharmacist Andrew Wilson worked as a manager at Boots the Chemists for seven years and was attracted to the position at Access 24 two years ago because it allowed him to use his clinical knowledge to a greater extent.

"Initially it was challenging as I lacked the medical information and information technology skills," he says. However his ability to communicate with patients was easily transferred from the pharmacy counter to telephone.

The hardest part is to reduce the amount of information we have to a few sentences in plain English." His colleagues in retail will be pleased to know that he often refers callers to their local pharmacy.

# Restructure increases sales

Ongoing restructuring of the AAH group helped increase sales significantly in the first half of the year.

The latest results from German parent Gehe reveal that AAH's wholesale arm boosted turnover by 20 per cent to DM3.3 billion (\$1.2bn) while the pharmacy/retail division including Lloyds Pharmacy increased its sales by 13.3 per cent to DM1.2bn (\$428m).

Both operations contributed to a rise in the group's first half operating profits of 5.7 per cent to DM240m (\$86m).

Since the acquisition of Lloyds Chemists last year, the AAH group has implemented a radical restructuring programme.

Wholesale business was transferred from Lloyds to AAH, Hills/Lloyds was rebranded as Lloyds Pharmacy and Vantage received its first major revamp for 23 years.

Arguably the biggest change has been the relocation and merger of ten administration



**AAH chief executive Michael Ward** 

centres into a new headquarters building in Coventry.

AAH Group chief executive Michael Ward said further changes to the UK business would be seen in the second half. "We have more than achieved the targets set for us and have exceeded expectations. However, there are still operating synergies to be achieved," he said.

Within weeks AAll expects to have reviewed EPoS data for all its Lloyds stores which will enable it to fine-tune merchandising and cut wastage.

•AAH Hospital Service has created a CD-rom to inform pharmacists, manufacturers and NHS management about the workings of the wholesale supply chain.

The disc, called The Complete Picture, is being sent free to 10,000 people and includes interviews with industry and hospital staff as well as AAH directors.

There are also hints on stock management and market trend data sourced from the Doll and the company's own research.

The CD-rom will be updated once a year, says AAH Hospital Service director, Jeremy Poole. "We are trying to develop an understanding and dialogue with the pharmaceutical industry's key staff who are not directly involved with the supply chain," he said.

# Strong pound puts dent in S&N profits

Smith & Nephew will spend the next six months making further cuts to its UK production facilities.

The company blamed the strength of the pound for a \$9 million (-11 per cent) slump in its first half pre-tax profits to \$71.9m and has moved 10 per cent of its UK production overseas.

The group's plants in South Africa and Indonesia began production in the first six months of 1998 while other work has been relocated to France.

The company has also spent around \$4m developing its artificial skin product Dermagraft, but its progress to the market has been slowed because the FDA asked for more clinical trials.

Despite turnover down 1.5 per cent to \$516.9m, chief executive Chris O'Donnell says around \$500m is available for acquisitions.

# Viagra royalty pay day for Pfizer

Pfizer could earn more than \$100 million in royalties from the first full year of sales of its impotence drug Viagra.

Industry estimates claim the global trade in Viagra could reach \$1.5bn (\$938m) in 1999 and Pfizer has secured rights to 10 per cent of all sales

Although Pfizer is a US company, the patent is held in the UK because the drug was developed at its site in Sandwich, Kent. This means the worldwide success of the drug could earn the Treasury more than \$100m in tax paid by Pfizer in the first year.

Meanwhile, Pfizer has announced plans to invest a further \$350m in the UK over the next three years, adding a research facility at Sandwich and a new headquarters at Reigate.

# Roche earnings up but margins down

Earnings at Swiss health care group Roche jumped 3 per cent to SFr2.5bn (\$1.03bn) in the first half of the year, although margins were down from 26 per cent to 20 per cent.

The company has sold DePuy orthopaedics to Johnson & Johnson, while the integration of diagnostics company Boehringer Mannheim, purchased last year, is now complete.

Sales of pharmaceuticals, the largest division, rose by 23 per cent to SFr7.3bn, and year-end profits are expected to be up.

# Explosion casts dark cloud over Shire's glowing sales figures

Shire Pharmaceuticals' worldwide sales trebled in the first six months of 1998, but the company faces a bumpy second half unless it can quickly find a new production site for its two most successful drugs.

Adderall and Dextrostat account for 63 per cent of the group's sales, but the explosion earlier this month at the US plant of Arenol, the sole supplier of the active ingredients (C&D August 15, p25), took the shine off the latest financial results.

Group turnover was up year-

on-year from \$13.2m to \$40.1m while a \$41,000 loss was turned into a \$5.4m pre-tax profit. Sales of products at its UK sales and marketing arm Shire Pharmaceuticals Ltd were up 26 per cent to \$6.5m.

Despite this, the group's share price fell by a quarter on news of the explosion and there are now fears that the overall business could return to the red.

Shire is said to be talking to two groups about relocating the manufacture of the active ingredients, but a deal must be signed soon, as supplies of both drugs will run out before the year end.

Shire would have to obtain clearance from the FDA and the Drug Enforcement Agency for any relocation.

In the six months to June, the company completed an international offering and listing on the NASDAQ stock exchange which raised \$20.6m.

The company also launched an epilepsy treatment, Carbatrol, in June, while the overall R&D budget was increased by 147 per cent from \$6.2m to \$15.3m.

# Xenova reports loss despite partnership

Announcement of a first drug development partnership helped boost Xenova Group's revenues in the first half of 1998. However, the group made a loss for the period of \$6.9 million (\$6.7m).

The company secured the collaborative agreement with Eli Lilly & Company based on Xenova's PAI-I preclinical programme in cardiovascular disease.

The R&D budget was increased from \$6.3m to \$8.0m as part of the leal, while general administration costs jumped from \$900,000 o \$1.9m because the group had o pay compensation to its former thief executive Louis Nisbet.

# Biofocus raises funds for expansion

Biofocus plc, which provides integrated chemistry services for drug discovery, has raised \$865,000 through a new share issue.

The Kent-based company will use the money to recruit more technical sales people in an

aggressive bid to increase its market share in the US and mainland Europe.

The company has contracts with Roche Discovery WeIwyn in the UK and Cubist Pharmaceuticals, ViroPharma and Scriptgen in the US.

# Ex-ICI man joins British Biotech board

Former ICl director Christopher Hampson will head the board of British Biotech from the end of September when current non-executive chairman John Raisman and chief executive Keith McCullagh leave the company.

Hampson's non-executive appointment to the troubled drug

development company comes five months after its head of clinical trials, Andrew Miller, left the firm.

The company has also been scrutinised by the Science and Technology Select Committee of MPs for allegedly misleading investors on the progress of new drugs.

# No more than 48 hours a week

Regulations implementing the European working time directive in Great Britain are now available from the Stationery Office.

The Working Time Regulations 1998 (SI No 1833, 4.15), coming into effect on October 1, stipulate that a worker should not work more than an average of 48 hours in seven days.

An adult will be entitled to a rest of not less than 11 consecutive hours in each 24-hour working period, while young workers (aged 15 to 17) will be entitled to 12 consecutive hours unless the work periods are split up over the day or of short duration.

Certain types of work where there is a need for continuity, such as research and development activities, are exempt.

An adult will be entitled to an

uninterrupted rest of not less than 24 hours in each seven-day working period. If the employer wishes, this can be taken as two uninterrupted rest periods of not less than 24 hours each, or one uninterrupted rest of not less than 48 hours in 14 days.

For young workers the rest period will be not less than 48 hours in each seven days, unless the work periods are split over the day or of short duration.

Adults who work more than six hours a day will be entitled to a rest break of not less than 20 minutes. Young people working more than four and a half hours daily will be entitled to a break of at least 30 minutes, consecutive if possible, which may be spent away from the workstation.

Workers will be entitled to

three weeks' paid leave, rising to four weeks after November 23. 1999. An employer may give advance notice of the days on which the worker may or may not take leave.

An employee will be regarded as unfairly dismissed if an employer imposes a requirement which contravenes the regulations and the worker is sacked for refusing to comply.

The National Minimum Wage Bill received Royal Assent on July 31. From April 1999 the minimum wage will be \$3.60 per hour before deductions. A development rate will apply to 18-21year-olds, phased in at \$3 an hour and rising to \$3.20 an hour in June 2000 for 18-20-year-olds. Temporary workers will also be covered by the requirements.

### ADVANCE INFORMATION

# PMS now booking ...

modules run by the Pharmaceutical Marketing Society gets under way in September.

Meetings usually start at 7pm and last for about an hour. The cost is \$30 plus VAT (non-members \$60). A \$15 discount is offered if all three autumn modules are booked.

The autumn programme is:

September 10 Nurse prescribing, by Mark Jones, primary care policy adviser, RCN. Venue: Smithkline Beecham, Welwyn Garden City.

October 8 NICE, by Dr Charles Dobson, Venue: Sanofi Winthrop, Guildford

November 12 Pharmacist prescribing, by Georgina Craig, NPA. Venue: Innovex, Marlow.

To register contact PMS secretary Vivien Bennett, PO Box 200, Horsham, W Sussex RII12 3FA (tel: 01403 264898).

'Delivering Clinical Pharmacy in the Community and Primary Care' is the theme of a UKCPA study day on September 22 at the Royal Pharmaceutical Society of Great Britain, 1 Lambeth High Street. For more details contact Mrs Pat Kennedy, tel 0116 277

On September 29 UKCPA is holding a study day at the Postgraduate Medical Centre, St Thomas' Hospital, London, on 'The Critical Care Pharmacist - Making a Difference'. Details as above.

The Psoriatic Arthritis & Psoriasis Conference '98 is being held on September 26 at Woburn Safari Park, free admission. Details from PAA on tel/fax 01923

Expopharm '98 will take place on October 1-4, in Munich, Germany. For further information contact Jennie Franks, tel 01638 751132.

The Institute of Pharmacy Management International will be holding a conference on October 9/10 at the Four Pillars Hotel, Witney near Oxford. Further details from the secretary, tel 01622 790745.

BrAPP is holding a symposium on October 21 at the Commonwealth Conference and Events Centre, High Street Kensington, London W8, entitled 'Ethical Review, Clinical Practice and Pharmaceutical Medicine: An Update'. For further information tel 0171 404 3404.

The Society of Cosmetic Scientists is holding its 20th residential postgraduate course on Novem-1-6 at the Stakis Bournemouth Hotel, Westover Road, Bournemouth, Hampshire. For further details contact the general secretary, tel 01582 72661

# Oral antidiabetic drug Novonorm gets EC OK

The European Commission has approved NovoNorm, an oral anti-diabetic agent for the treatment of Type 2 diabetes, made by Danish company Novo Nordisk A/S.

This is the company's first step into the Type 2 market.

The manufacturer describes the drug as a fast-working agent that is taken with meals.

It absorbs rapidly and clears quickly from the bloodstream.

NovoNorm should be launched in most European Union countries before Christmas, according to Novo Nordisk.

# UK pharmacy drug sales outpace global growth rate

Sales of drugs through UK pharmacies grew at a faster rate than for the retail trade worldwide in the year to April.

According to the IMS Ilealth Drug Monitor, UK sales rose 7 per cent to \$7.9 billion (\$4.9bn), while the overall level across the major countries surveyed went up 6 per cent to \$178.9bn (\$111.8bn).

North America is still world leader with a growth of 11 per cent, while across the top five European territories growth was 5 per cent with a total value of \$49.3bn (\$30.8bn). In Europe, the UK's year-on-year increase was

Cardiovascular drugs made up the largest retail sector in the therapeutic category.

second only to Spain (10 per cent).

# **CP** rewards staff with shares

Sales at CP Pharmaceuticals have more than doubled since a management buy out from Fisons five years ago, and a share option scheme has launched to reward staff.

CP plans a flotation within the next three years, and 3 per cent of its shares are being made available to employees who can convert their options into taxfree shares when the flotation goes ahead.

The management buy out team took control of CP on August 13, 1993 when sales were \$11m and the company was making a loss of more than \$3m a year.

Turnover has jumped to \$24m since the takeover and staff have risen from 194 to 354 as the company has reaped the rewards of an active R&D programme. In the last financial year, \$8m worth of sales came from products launched since the acquisition.

Finance director Coveney said the board wanted to thank the staff.

"A share option seemed the fairest way. The exact number of shares will be based on length of service and level of responsibility. It also means employees will benefit from the future growth of the company," he said.

# Bank issues recession advice to businesses

National Westminster Bank is offering small businesses advice on how to survive if the economy lurches into recession.

The bank says pharmacies must monitor their cashflow and draw up a break-even point.

They should remember which trading areas were most vulnerable in the last recession and how

their competitors reacted.

This advice came as NatWest announced it has fixed the interest rate for its secured business development loan at 8.69 per cent and at 10.19 per cent for unsecured lending.

The company stresses that these rates will vary if economic conditions change.

# Schering bears brunt of Asia crisis

Schering's sales rose just under 4 per cent to DM3.2 billion (£1.1 billion) for the six months to June 30.

The German company performed relatively poorly at home, and felt the impact of South-east Asia's recession, where its turnover dived 34 per cent. Its growth in the US was relatively sluggish.

Pre-tax profits rose 11 per cent to DM555 million.

Sales in Europe were up 6 per

cent to DM1.702 billion, while operating profits rose 15 per cent to DM385 billion.

Schering's best performing category was fertility control/hormone therapy, whose sales rose 11 per cent to DM1.168 billion, followed by therapeutics products, which grew 3 per cent to DM983 million.

Diagnostics sales, however, fell 4 per cent to DM737 million, while dermatology products fell 4 per cent to DM207 million.

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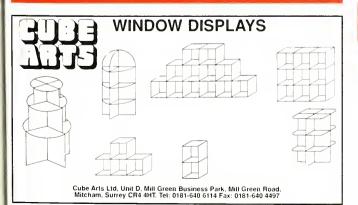
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Why not sell them out in your stores? We hold the distribution for UK/Ireland and the EEC, as this is set to be all the craze for Summer 1998. Please look below at the profits you can make on this product!



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Free entries in 'Business Link' (maximum 30 words) are restricted to community pharmacist subscribers to Chemist & Druggist. No trade advertisements will be permitted. Adverts must be submitted on the coupon (right), which must be properly completed, and include an expiry date for products. Acceptance is at the discretion of the Publishers and depends on the space available. Pharmacists should only advertise medicines for sale where the product is discontinued or in short supply. Medicines must be unopened and in original packaging.

To: Business Link, CHEMIST & DRUGGIST, Miller Freeman House, Sovereign Way, Tonbridge, Kent TN9 1RW.
PLEASE COMPLETE IN BLOCK CAPITALS
Surname
First names
Address
Personal RPSGB Registration number
Telephone Number
Proposed advertisement copy (maximum 30 words)

# **BOUT people**

# Cohens gets into the way of giving

A sponsored hike along the Pennine Way by a driver from Cohens Chemist central warehouse has mushroomed into a charity initiative which could involve all the Bolton-based company's 54 outlets.

Money raised by driver Joe Tucker, who used a fortnight's holiday to do the walk from Edale to Kirk Yetholm, combined with the proceeds of other fundraising events, means a Bolton children's hospice will benefit to the tune of \$5,300.

An 'open air day' on August 9, held at the Deane & Derby Cricket Ground, attracted 400 people and raised \$750. Shop staff have sold badges and bears, and donated pay. Warehouse staff raised \$60 from a 'mistake box' at \$1 a time.

Margaret Higson, the company's locum co-ordinator, who has also become the charity coordinator, is going with the company's owners, pharmacist Anwer Patel and his accountant brother Yakub, to present the money to the Derian House Hospice this week.

The success of this year's charity challenge means it looks like becoming an annual event. To give the company's branches in Manchester and Leeds a more local focus for fundraising, hospices in these two cities will also benefit from future efforts.

"Children's hospices do not get support from health authorities and rely on donations," explains Mrs Higson. She has just been certified by her GP as fit to train for a sponsored parachute jump.

Joe Tucker is looking for volunteers to join him in another Pennine marathon next May. Karen Rice, a pharmacy manager, looks all set to take part.

**APPOINTMENTS** 



Charles Gladwin

# Gladwin appointed News Editor at C&D

Chemist & Druggist has appointed its senior news reporter Charles Gladwin as News Editor.

Mr Gladwin joined C&D as a trainee journalist in November having worked in community pharmacy seven years.

He graduated from the School of Pharmacy, University of London, in 1987 and worked as a relief pharmacist in southeast London and north Kent before spending four years with an independent pharmacy.

Hannaford has been appointed assistant brand manager for Regaine by Pharmacia & Upjohn. He joins from Procter & Gamble.

Dale Arm-Riding is Positive Solutions' new sales manager. He will be responsible for major groups and accounts throughout the UK and Ireland. Hugh Collum becomes a director of Chiroscience Group from October 1, when he succeeds Lord Henry Chilver as chairman. He is currently executive vice-president of Smithkline Beecham. Robert Jackson becomes executive director R&D.

Dr Mike Gaitonde has been appointed medical director for Shire Pharmaceutical Contracts Ltd. He joins from Roche.

The post of technical director to the Child-Safe Packaging Group has been filled by Trevor Hopley of United Closures & Plastics.

A Goldshield survey of health professionals has raised £4,026 for the National Society for the Prevention of Cruelty to Children. For each survey form returned Goldshield donated £1 to the charity. The 'sweetener' worked as the response rate of 17 per cent is much higher than normal. Sarah Schofield (left) from the NSPCC is presented with a cheque by Faye Nicholas, brand manager for Infaderm and Infadrops, who believes this will be the first of many joint ventures with the NSPCC



# All the right props for olde worlde festival

Pharmacist Dorothy Drury and her staff had just the right kind of backdrop when they dressed in early 19th century costume to celebrate the Old Town Festival in Bridlington recently.

The pharmacy she took over on the High Street this spring dates back to 1811 and contains some of the original fittings.

The previous owner, Lol Elliot, was once offered \$10,000 by an

American for the shelves full of medicine drawers and drug jars, but opted instead to sell them to the property's trustees, the Lords Feoffees, who have agreed to preserve them in the pharmacy.

The festival aimed to bring more trade into the old part of the seaside town.

Mrs Drury worked as a hospital pharmacist and did locums before taking over the business.

# Amersham chief to be new chairman of The Prince's Trust

William Castell, chief executive of Nycomed Amersham, is taking on a new role from mid-September as chairman of The Prince's Trust.

Mr Castell first came into contact with the Trust in 1993 during a visit with the Prince of Wales to the Penrhys housing estate in the Rhonnda Valley. He was instrumental in setting up the Penrhys Partnership, a scheme to help tackle high unemployment and other social problems in the village.

Newspaper reports say that each year he invites eight or nine young people from Penrhys to spend a week with his family.

Mr Castell was appointed chief

executive of Amersham International, now Nycomed Amersham, in 1990, having formerly been group commercial director of Wellcome plc.

The Prince's Trust about \$40 million a year to help young people between 14 and 30 with training, personal development and loans and grants.

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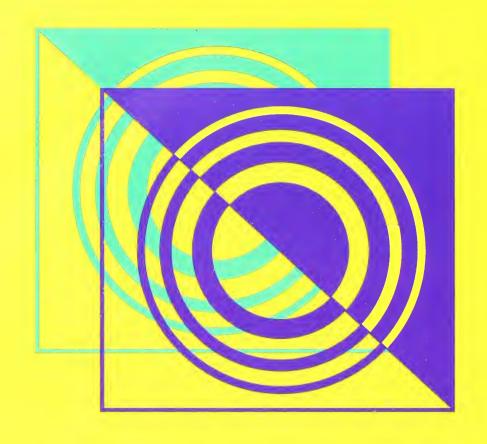
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